



CULINARY MEDICINE

# ONE HEALTH WORKBOOK



# HOW TO USE WORKBOOK

ONE HEALTH IS A MODEL FOR DEEPENING YOUR RELATIONSHIP TO NATURE IN ORDER TO CULTIVATE A DEEPER UNDERSTANDING OF YOUR OWN HEALTH.

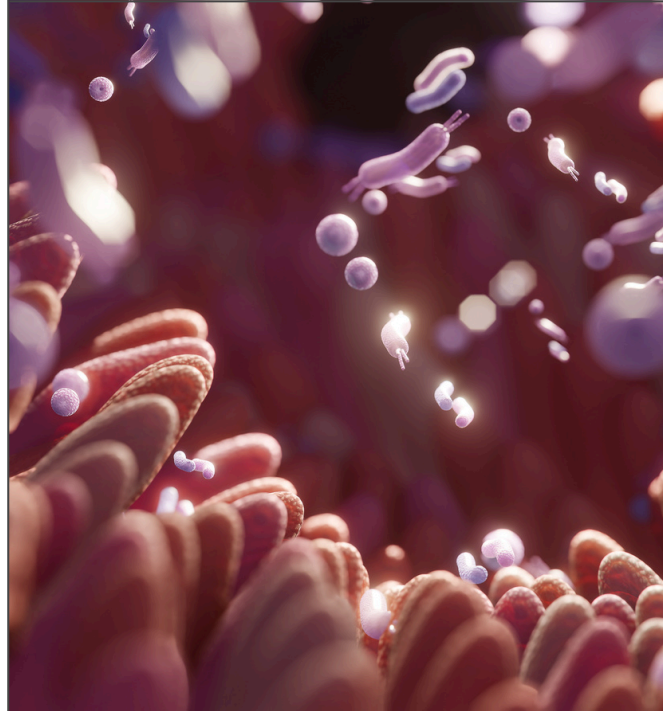
THESE PAGES ARE AN INVITATION TO GATHER AND ORGANIZE INFORMATION ABOUT YOURSELF, YOUR ONE HEALTH VISION, YOUR PRIORITIES, LIFESTYLE GOALS, AND CULINARY NEEDS, PREFERENCES, INTERESTS.

TAKE TIME TO REFLECT ON THESE PROMPTS BEFORE MAKING ANY NOTES. LET THE PROMPTS WORK THEIR WAY PAST YOUR EVERYDAY THINKING BRAIN AND LET THEM WORK WITH YOUR IMAGINATION.

CURIOSITY CAN BE A WONDERFUL COMPANION FOR THESE EXERCISES. SOLUTIONS CAN PRESENT THEMSELVES IN UNEXPECTED WAYS WHEN CURIOSITY IS AT THE HELM.

IF YOU FIND YOURSELF FEELING OVERWHELMED, SIMPLY TAKE A PAUSE, TUNE INTO YOUR BREATH, AND LET THE FEELINGS MOVE THROUGH YOU. TRY NOT TO WORRY ABOUT WHAT THOSE FEELINGS ARE OR WHERE THEY COME FROM - JUST EXHALE AND LET GO.

THERE WILL BE PLENTY OF OPPORTUNITIES TO EXPLORE THESE FEELINGS MORE.



## 3 SPHERE

# ONE HEALTH MODEL

PLANTS

A BROAD CATEGORY THAT REFLECTS ORGANISMS THAT **MAKE HUMAN LIFE POSSIBLE** SUCH AS PLANTS, FUNGI, ANIMALS, BACTERIA, AND VIRUSES

PEOPLE

**HUMANS AND THEIR RELATIONSHIPS** INCLUDING SELF, FAMILY, FRIENDS, NEIGHBORS, COMMUNITIES, SOCIETY, ETC. THE RELATIONSHIPS **PEOPLE HAVE TO PLANTS AND PLANET**

PLANET

THE ALL ENCOMPASSING ENTITY THAT INCLUDES ALL LIFEFORMS. THE PLANET VERY LIKELY PLAYS A ROLE IN LARGER ASTRONOMICAL ENERGY BALANCE AND UNIVERSAL HEALTH.



# INQUIRY



1 Relationship to Plants

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2 Relationship to People

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3 Relationship to Planet

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3 SPHERE

# ONE HEALTH VISION

WHAT I WANT MY LIFE TO LOOK LIKE IN A YEAR:

WHO ELSE OR WHAT ELSE BENEFITS FROM THIS VISION?

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MOSS

# FORMULA

TAKE ANOTHER LOOK AT YOUR VISION AND APPLY THE MOSS FORMULA TO HELP YOU GET READY FOR SETTING GOALS.

M

MOTIVATION

WHY DO I CARE ABOUT THIS?

O

OBSTACLES

WHAT IS STANDING IN MY WAY?

S

STRENGTHS

WHAT ARE MY GIFTS?

S

STRATEGY

HOW MIGHT WE GO ABOUT THIS?



# WHOLE FOODS

## DIETARY INTAKE

FOR EACH OF THE CATEGORIES BELOW, WRITE DOWN THINGS YOU ARE DOING WELL AND WHERE YOU NEED IMPROVEMENT. TAKE THE TIME TO REFLECT ON THESE, AND WRITE A GOAL FOR EACH CATEGORY.

FRUITS

VEGETABLES

BERRIES

NUTS/SEEDS

GRAINS

BEANS/LEGUMES

MEAT/DAIRY



# SWOT

# ANALYSIS

A SWOT ANALYSIS IS A SIMPLE TECHNIQUE TO IDENTIFY YOUR STRENGTHS, WEAKNESSES, OPPORTUNITIES AND THREATS. FILL OUT THE BOXES BELOW TO FIND OUT YOURS!

## STRENGTHS

S

## WEAKNESSES

W

## OPPORTUNITIES

O

## THREATS

T

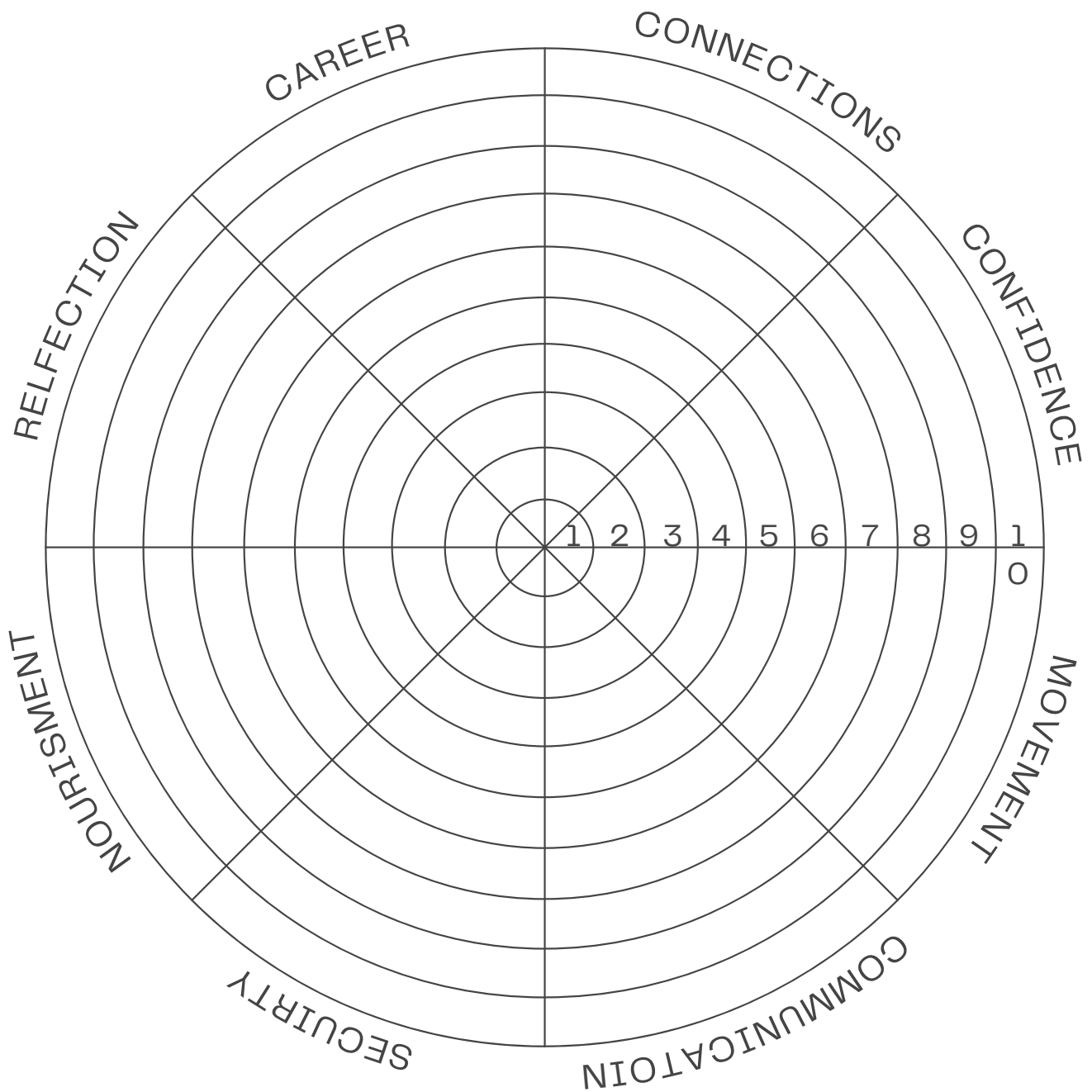




# WHEEL OF

# LIFESTYLE

THE WHEEL OF LIFE IS A GREAT TOOL THAT HELPS YOU BETTER UNDERSTAND WHAT YOU CAN DO TO MAKE YOUR LIFE MORE BALANCED. THINK ABOUT THE 8 LIFE CATEGORIES BELOW, AND RATE THEM FROM 1 - 10.



# SELF-AWARENESS ASSESSMENT

READ THE PROMPTS BELOW AND THINK ABOUT THE FIRST THING THAT COMES TO MIND. FILL YOUR ANSWERS OUT IN THE BLANK BOXES.

I AM A HUMAN BEING THAT...

<b>LOVES</b>	
<b>WANTS TO</b>	
<b>IS DRIVEN BY</b>	
<b>IS INSPIRED BY</b>	
<b>HAS A HABIT OF</b>	
<b>IS HAPPIEST WHEN</b>	
<b>BELIEVES IN</b>	
<b>WOULD GIVE</b>	
<b>WILL ONE DAY</b>	
<b>HAS THE GOAL OF</b>	
<b>WHO NOTICES</b>	
<b>IS AFRAID OF</b>	

## ACTION

# BRAINSTORMING

ACTION BRAINSTORMING CAN HELP IDENTIFY WHAT THINGS ARE HELPING OR STOPPING YOU FROM ACHIEVING YOUR GOALS.

MY GOAL:

STOP  
DOING

DO  
LESS OF

KEEP  
DOING

DO  
MORE OF

START  
DOING

# SMART GOALS

WHEN SETTING GOALS, MAKE SURE IT FOLLOWS THE SMART STRUCTURE. USE THE QUESTIONS BELOW TO CREATE YOUR GOALS.

<b>S</b>	<u>SPECIFIC</u> WHAT DO I WANT TO ACCOMPLISH?	
<b>M</b>	<u>MEASURABLE</u> HOW WILL I KNOW WHEN IT IS ACCOMPLISHED?	
<b>A</b>	<u>ACHIEVABLE</u> HOW CAN THE GOAL BE ACCOMPLISHED?	
<b>R</b>	<u>RELEVANT</u> DOES THIS SEEM WORTHWHILE?	
<b>T</b>	<u>TIME BOUND</u> WHEN CAN I ACCOMPLISH THIS GOAL?	



# LIFESTYLE

# GOALS

FOR EACH OF THE CATEGORIES BELOW, WRITE DOWN THINGS YOU ARE DOING WELL AND WHERE YOU NEED IMPROVEMENT. TAKE THE TIME TO REFLECT ON THESE, AND WRITE A GOAL FOR EACH CATEGORY.

<b>CATEGORY</b>	<b>WHAT I'M DOING WELL</b>	<b>WHERE CAN I STRENGTHEN</b>	<b>MY GOALS</b>
<i>FAMILY</i>			
<i>FRIENDS</i>			
<i>WORK/ SCHOOL</i>			
<i>BODY</i>			
<i>MENTAL HEALTH</i>			
<i>SPIRITUALITY</i>			



# LIFESTYLE

# ROUTINE

FILL IN THE CHECKLIST SPACES BELOW WITH SELF-CARE ACTIVITIES THAT YOU CAN DO IN THE MORNING AND AT NIGHT.

## MORNING SELF-CARE

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## NIGHT SELF-CARE

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



# LIFESTYLE JOURNAL

DAILY AFFIRMATIONS

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TODAY I AM GRATEFUL FOR

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TODAY'S TOP GOALS

01

02

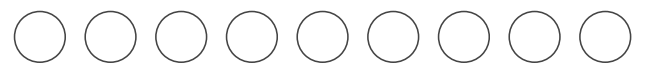
03

SCHEDULE


WATER



SLEEP



MOOD



NOTES

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7 DAY

# HABIT TRACKER

KEEPING TRACK OF YOUR HABITS CAN HELP YOU STAY ON TRACK AND ACHIEVE YOUR GOALS. FILL OUT YOUR TOP 12 GOALS AND MARK THEM OFF EACH DAY YOU SUCCESSFULLY COMPLETE THEM.

WEEK OF: \_\_\_\_\_

HABIT / SELF-CARE STEP	S	M	T	W	T	F	S
01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
08	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
09	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REFLECTION NOTES

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