

# Life Change Self-Test Inventory

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This is an opportunity for you to identify significant changes in your life. There are 191 items in three main sections describing ways life can be changed: through changes in *relationships*, changes in *self*, and changes to *circumstances*. Many of these will not apply to you. Some may involve things that affected you in the past but are not significant now. Some are clearly affecting you now regardless of how long ago they happened. Still others may lie in your future but are already affecting you. *Consider only how it is affecting you at the present time.*

Check whether it seems to be mainly a GAIN (**G**), a LOSS (**L**) or BOTH (**B**). If an item does not apply to you, do not mark it. Then, when you have finished each section, add up the totals in the space provided, and also do so at the end of the checklist.

## I. Changes in Your Relationships

### A. With Partner/Best Friend/ Spouse

	<b>G</b>	<b>L</b>	<b>B</b>
1. Fall in or out of love	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Intense sexual relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Marry/enter a committed relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Change in spiritual relationship with partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Not have a partner/best friend	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Death of a partner/best friend	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Divorce, separation or parting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Partner/friend/spouse in jail/prison	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Prolonged absence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Reconciliation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Betrayal of trust	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Marital or relationship conflict	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### B. Changes with Your Parents / Grandparents, etc.

	<b>G</b>	<b>L</b>	<b>B</b>
13. Death of a parent / grandparent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Leaving parents' home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Have parents reconcile with one another	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Contact limited	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Disowned or alienated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Returning to live at parents' home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Parental separation or divorce	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Institutionalize a parent / grandparent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Parental illness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. Reconcile with parents/grandparents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Change in spiritual relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. One or both parents remarry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### C. Changes With Your Children/Grandchildren, etc.

	<b>G</b>	<b>L</b>	<b>B</b>
24. Have or adopt a child/grandchild	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Raise child/grandchild	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Child/grandchild starts daycare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Child/grandchild starts school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Child leaves home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Child's marriage/divorce	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Move (as a family)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Child's illness or disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Adult children living at home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Raise child(ren) alone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Beginning/change in visitation rights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Alienation or estrangement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Change in spiritual relationship with children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Not having children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Death/stillbirth of a child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Miscarriage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Abortion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Kidnapping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Disappearance of a child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Place a child for adoption	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Run away child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. Institutionalize a child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Child in jail/prison	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**D. Changes with Your Brothers, Sisters or Other Close Relatives**

	<b>G</b>	<b>L</b>	<b>B</b>
47. Death of a sibling or close relative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. Serious illness of a sibling or close relative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Their legal / financial / criminal problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Inheritance issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Lose contact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. Live with a sibling or relative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Estrangement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. Reconciliation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. Dealing with a sibling's problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**E. Changes with Friends / Roommates /Members of Household**

	<b>G</b>	<b>L</b>	<b>B</b>
56. Death of a friend / roommate / etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. Betrayal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Move away of friends/etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Leave a friendship/community, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Other relationships interfere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61. Estrangement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Reconciliation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Spiritual relationship with friends, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. Friendship redefined as a love relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
65. Love relationship redefined as friendship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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## II. Changes in Self

**A. Changes in Relationship To Yourself**

	<b>G</b>	<b>L</b>	<b>B</b>
66. Altered self respect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
67. Change in self confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
68. Shift in self appreciation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
69. Altered access to your spiritual self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
70. Altered access to your "best self"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
71. Altered ability to experience / express feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
72. Pride / shame in accomplishment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
73. Identify, recognize or lose a purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
74. Fulfill / lose a mission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
75. Fulfill / lose potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
76. Fulfill / relinquish a dream	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
77. Acknowledge faults / limits / shortcomings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

78. Able to put own needs first	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
79. Able to put others needs first	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
80. Able to give to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
81. Able to receive from others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
82. Admit weakness / destructiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
83. Violate / affirm own values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
84. Change in self care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
85. Altered personal attractiveness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
86. Shift in sexual interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**B. Changes in Status or Prestige**

	<b>G</b>	<b>L</b>	<b>B</b>
87. Successfully graduate / fail to graduate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
88. Become famous / notorious	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
89. Be arrested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
90. Publicly "losing face"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
91. Win / lose a lawsuit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
92. Be cleared of an accusation / convicted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
93. Adopt / leave a religious life style	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
94. Sexual orientation made public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**C. Changes in Self-Improvement**

	<b>G</b>	<b>L</b>	<b>B</b>
95. Exercise changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
96. Relaxation changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
97. Drug use / addiction (start or stop)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
98. Smoking (start or stop)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
99. Alcohol use / addiction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
100. Weight change	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
101. Sexual ability (potency / impotence, orgasmic)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
102. Changes in nutrition or diet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
103. Counseling or psychotherapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
104. Changes in career direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
105. Education or training (change, start, stop)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
106. Hobby, class, or special interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**D. Changes in Your Spirituality**

	<b>G</b>	<b>L</b>	<b>B</b>
107. Spiritual direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
108. Hopefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
109. Faith	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
110. Ability to love and receive love	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- 111. Religious community
- 112. Spiritual (healing) community
- 113. Spiritual awareness
- 114. Forgive / not forgive self
- 115. Forgive / not forgive others
- 116. Meaningfulness of life
- 117. Pleasure of everyday activity
- 118. Purpose / mission/calling

**E. Changes to Your Health**

- |                                      | <b>G</b>                 | <b>L</b>                 | <b>B</b>                 |
|--------------------------------------|--------------------------|--------------------------|--------------------------|
| 119. Contract a serious illness      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 120. Be in an accident               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 121. Recover from an accident        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 122. Recover from a serious illness  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 123. Reach the limits of recovery    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 124. Chronic condition               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 125. Amount / type of pain           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 126. Rely on medications to function | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 127. Type of treatment / therapies   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 128. Changes due to aging            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**F. Changes Due To Traumatic Experiences**

- |  | <b>G</b>                 | <b>L</b>                 | <b>B</b>                 |
|--|--------------------------|--------------------------|--------------------------|
| 129. Arrest  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 130. Convicted/exonerated                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 131. Imprisoned                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 132. Physically abused                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 133. Being the child in an incestuous relationship   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 134. Tortured  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 135. Raped   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 136. Witness a violent act                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 137. Injure / kill someone accidentally              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 138. Injure / kill someone deliberately              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 139. Be the focus of prejudice or discrimination     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 140. Be the focus of verbal or mental abuse          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 141. Be the focus of isolation or shunning practices | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 142. Be unable to control impulses                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**III. Changes in Circumstance**

**A. Job-Related Changes**

- |   | <b>G</b>                 | <b>L</b>                 | <b>B</b>                 |
|---|--------------------------|--------------------------|--------------------------|
| 143. Fired                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 144. Retired                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 145. Promoted                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 146. Hired                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 147. Reassigned                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 148. Demoted/ responsibilities diminished | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 149. Passed over for promotion            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 150. High work demands                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 151. Abusive work environment             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 152. Sexual harassment                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 153. Ethics charge                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 154. Underemployed                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 155. Self employed                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 156. Work out of home                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 157. Unable to change careers             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 158. Not yet able to change a career      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 159. Unable to find meaningful work       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 160. Downsized own business               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 161. Set limits on work                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 162. Market oneself                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 163. Other work related changes:          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**B. Financial Changes**

- |  | <b>G</b>                 | <b>L</b>                 | <b>B</b>                 |
|--|--------------------------|--------------------------|--------------------------|
| 164. Meet / not meet basic survival needs            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 165. Increase / decrease in significant indebtedness | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 166. Win the lottery / receive major inheritance     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 167. Have "more than enough"                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 168. Begin / end bankruptcy                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 169. Significant change in salary or income          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 170. Adequate / inadequate health insurance          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 171. Live on a fixed income                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 172. Not have to work for a living                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 173. Intentionally reduce income                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**C. Changes in Your Community or Nation**

	<b>G</b>	<b>L</b>	<b>B</b>
174. Death of a national, state, community, or religious figure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
175. Community catastrophe or natural disaster	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
176. Begin / end of war	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
177. Economic depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
178. Connection to a community cause or collective goal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
179. Natural beauty of your environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
180. Shift in environmental quality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
181. Gain / lose personal impact on environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**D. Other Changes in Circumstances/Connections**

	<b>G</b>	<b>L</b>	<b>B</b>
182. Gain or lose a pet(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
183. Your home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
184. Property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
185. Moving	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
186. Loss of favorite mementos or photos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
187. Changes in homeland or culture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
188. Change in use of your native language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
189. Live in an unfamiliar environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
190. Theft or robbery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
191. Intentionally simplify life style	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**Summary of Life Changes**

	<b>G</b>	<b>L</b>	<b>B</b>
<b>Changes in Relationships</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Changes in Self</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Changes in Circumstance</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TOTAL LIFE CHANGES</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>