CONSTRUCTION AND VALIDATION OF THE “EIGHT NATURAL REMEDIES” QUESTIONNAIRE - ADVENTIST LIFE STYLE

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ABSTRACT

Objectives: To construct and validate the Eight Natural Remedies Questionnaire, in adult and adolescent versions, to assess adherence to healthy habits that are considered to be constitutive of the Seventh-day Adventist lifestyle. It is a conceptual, descriptive, involving 20 judges who participated as experts in analyzing the construct. The domains are: nutrition, exercise, water, sunlight, temperance, air, rest and trust in God.

Results: The meanings, dimensions and descriptors of the “lifestyle” construct with 25 items and eight domains were identified, as well as reliability measures of the construct analysis (Cronbach's alpha = 0.90) and the questionnaire pilot test for adults and adolescents were Cronbach's alpha = 0.75 and 0.67 respectively. The percentage of agreement on the characteristics of the instrument was above 80% in the last applications, and the content validity index for the same characteristics were also above 0.8.

Conclusion: The instrument presents evidence of validity regarding the content to be applied, especially to the population of participants of the Health Fairs, for both adults and adolescents. Measures of validity and reliability have attained adequate indexes and are considered to be a content-valid instrument, which corresponds to Ellen White's proposal for lifestyle advocated by Seventh-day Adventists to promote health.

INTRODUCTION

Lifestyle is "a typical way of living that characterizes an individual or group" and a healthy lifestyle is "a pattern of behavior that involves lifestyle choices that ensure optimal health". An example of this is "eating well, maintaining physical, emotional and spiritual well-being and taking action against communicable diseases" (Biblioteca Virtual em Saúde, 2018). According to the World Health Organization (2004), Health Lifestyle is understood as the set of habits and customs that are influenced, modified or inhibited by the process of socialization in the course of life with important implications for health and are often object of epidemiological investigations. Ripoll (2012) mentions that the concept of
Lifestyle was first used in 1979 by the writer Alvin Toffler (Toffler, 1981), who predicted an explosion of different lifestyles in a postmodern society. For him, the global way of living, involving eating, exercising, resting, working, thinking, driving and others are all included in the term lifestyle. Among the researches on this theme, the "Adventist lifestyle" has been the object of studies with important repercussion and association to longevity. In the "Blue Zones" study, Seventh-day Adventists in Loma Linda, California, are considered one of the world's three longest-lived populations (Buettner, 2010; Fraser, 2009). Among the strategies and recommendations for adoption of the so-called "Adventist lifestyle" for education and health promotion, the acronym NEWSTART, officialized in 1978 with the objective of improving people's quality of life and reducing the burden of chronic diseases (Henry, 2004). The acronym is formed by the words in English: Nutrition; Exercise; Water; Sunlight; Temperance; Air (pure air); Rest and Trust in God. This proposition is differentiated by guiding the use of these low-cost, universal access natural resources, which has recently been recognized by the World Health Organization (WHO) as an initiative of Adventists to promote health through lifestyle. The adoption of healthy habits based on the use of these resources was considered a valid strategy for coping with NCDs (World Health Organization, 2008, 2014). One of the greatest challenges for the 21st century in the health area has been the control of chronic non-communicable diseases (DCNT), among which hypertension, diabetes and obesity are the most impacted in the health sector (Brazil, 2017). The complications resulting from these diseases could be minimized by special attention to the practice of healthy habits and a commitment to self-care (Malta et al., 2011; Duarte and Barreto, 2012; World Health Organization, 2012). The process of sickness translates into a new approach in health considered as lifestyle medicine, which is attributed a close association between NCDs and the lifestyle adopted by people, mainly related to the exaggerated salt intake, physical inactivity, consumption of alcohol and tobacco (Ripoll, 2012; Lenz, 2013). The NEWSTART lifestyle change program emerged from a proposal by North American writer Ellen White over 150 years ago, disclosed in internal manuscripts that contained guidelines on the concomitant use of resources already mentioned. These resources were named "Eight Natural Remedies" and are oriented as healthy habits to prevent and treat diseases (White, 2007). With the deepening of research on the lifestyle of Adventists, it became necessary to construct instruments that could subsidize new and more complete research that evidenced the adoption of the population to these habits, according to the parameters presented by the NEWSTART program. In this sense, the purpose of this study was to construct and validate a "Questionnaire on the Eight Natural Remedies", nominated by the researchers as Q8RN (in Portuguese), in the adult and adolescent versions, to evaluate adherence to healthy habits that are considered to constitute the Adventist lifestyle of the Seventh Day.

**MATERIALS AND METHODS**

Conceptual methodological study, characterized by investigations that deal with the development, validation and evaluation of tools and research methods (Polit and Beck, 2011). The theoretical model adopted for constructing the questionnaire was proposed by Coluci et al. (2015) described below: Step 1 - Domain specification: Evaluation of each domain of the instrument, noting if it was adequately covered by the set of items; Step 2 - Evaluation of the items: clarity (wording of the items, noting if they were written so that the concept is understandable and is adequately expressed what is expected to be measured) and representativeness (note if the items really reflect the concepts involved, whether they are relevant and whether they are adequate to achieve the proposed objectives. Initially, the research group on Religiosity and Spirituality in Health Integrality (REIS), registered in the CNPQ, lacked an instrument that objectively measured the practice of healthy habits related to the eight natural remedies in Health Fairs, whose purpose has been to guide the adoption of a lifestyle that helps prevent and treat diseases, especially NCDs. The Q8RN was based on some validated instruments in Brazil and other countries. They are: FANTASTIC Questionnaire, validated by Rodriguez-Añez et al. (2008), Ramirez-Vélez and Agredo (2012) and Silva et al. (2014) and applicable to the population from 15 years of age; NAHAS Pentacle Questionnaire, validated by Nahas, Barros, Francalacci (2012); DUKE-DUREL Religious Questionnaire, validated by Taunay et al. (2012) and Lucchetti et al. (2012). The meanings, dimensions and descriptors of the "lifestyle" construct were identified, and each item was first elaborated for the respective domains, structured according to the eight natural remedies. They were invited to evaluate the content of the questions created by the team of the REIS research group, health professionals with at least 10 years of professional experience in academic activities related to Health Promotion with emphasis on lifestyle, as well as health professionals with experience in the construction and validation of tools and research methods. Also included in the Judges group were people with "notorious knowledge" and recognized for their involvement in work related to health lifestyle. According to Pasquali (1998) and Coluci, Alexandre and Milani (2015) five to ten specialists are needed to evaluate the construct and its psychometric measures. The first step was the application of an instrument suggested by Coluci et al. (2015) called "Box 1" that sought to evaluate, from the perspective of the group of experts, the conceptual aspects of the domains and the respective issues that were previously elaborated by the researchers according to the formula:

\[
\% \text{ concordance} = \frac{\text{Number of participants who agreed x 100}}{\text{Number of total participants}}
\]

The devolution of the judges containing the answers of the evaluations on the items of the questionnaire were analyzed regarding the proposed objectives and the incorporated suggestions, being included in the structure of the instrument five questions considered essential by the specialists. In the second stage, "Box 2" was also prepared, based on Coluci et al. (2015), to evaluate the judges' agreement on the content validity index (CVI), according to the formula:

\[
\text{CVI} = \frac{\text{number of answers "3" or "4"}}{\text{Total number of answers}}
\]

After performing the analyzes and corrections suggested, the instrument was configured for an Android platform by experts, who produce applicatives and after that, it was applied as a pre-test in a small representative sample of the target population, adults and adolescents. The correct adjustments were made based on the answers obtained. In two face-to-face meetings with the judges, the restructured 8NR was presented and discussed to seek consensus on possible differences related to the content of the issues and their domains.
After extensive debate, the instrument was then considered appropriate in its structure and validated as to the content to investigate to what extent the adoption of habits that are part of the healthy lifestyle oriented by Adventists takes place. In order to obtain evidence of construct validity, a simple descriptive statistic with absolute and relative frequency measurements and internal reliability (Cronbach's Alpha) was performed based on the data collected, according to the instruments (Boxes 1 and 2) suggested by Coluci et al. (2015).

RESULTS AND DISCUSSION

The 8NR instrument was developed with eight domains (1 - Nutrition, 2 - exercise, 3 - water, 4 - sun, 5 - temperance, 6 - air, 7 - rest and 8 - trust) and 25 items, after content validation by the committee of experts. Among the judges, 19 participated in this first stage, 11 doctors, 2 masters and 6 specialists in health promotion. All participants had at least ten years of academic or practical experience in the area of healthy living. In the application of "Box 1", a percentage was calculated based on what was guided by Coluci et al. (2015), for the validation of content by the judges.

Only the "exercise" domain was below 90% (Figure 1), being corrected as suggested by the judges for reassessment in the second stage. It should be noted that the Q8RN was initially elaborated with 20 questions, however, when it was evaluated by the judges it was suggested to add a few more questions in some dimensions. Working with the eight natural remedies is not as simple as that, because some topics are very extensive and controversial. For example, proper nutrition involves not only eating a varied diet with fruits and vegetables, but also the amount of meals per day and the standard food classification. Balanced nutrition must meet the principles of variety, balance, moderation, flavor, free from contamination (Brazil, 2013). Another controversial aspect concerns the number of daily meals, whose recommendations, according to Adventist-oriented lifestyle for people in general, should be restricted to the frequency of three meals, the first being considered the most important as argued by Kahleova et al. (2017). Another area of the questionnaire that won the most items was exercise, whose purpose is to know if the person dedicates time to leisure activities, which are equivalent to light or moderate physical exercises and are also pleasurable; if you practice intense physical exercises and how much time is spent in each session.

Figure 1. Percentage of concordance between judges in Q8RN domains (Version 20 items). São Paulo, 2018

Figure 2. Content Validity Index (CVI) among judges as to the clarity and representativeness of Q8RN items. São Paulo, 2018
According to the DeCS (2018) exercise should be a "regular activity done with the intention of improving and maintaining physical fitness or health", different from physical effort (DeCS, 2018). Studies have shown that the practice of regular physical exercises helps in the quality of life and in the prevention of the comorbidities that obesity brings with it, affecting intensely the lifestyle (Guimarães et al., 2015; Dutra et al., 2017). Temperance and trust in God were also domains that received more questions, judges say, because of the complexity of the concept within the Adventist health philosophy, making it more comprehensive and representative of the proposed lifestyle. Basically, temperance is the flagship of the Adventist health philosophy and involves the moderate use of what "does good" and abstinence from what "harms" health (White, 2007). A new approach in health called "lifestyle medicine," which attributes a close association between NCDs and the lifestyle adopted by people, draws attention to alcohol and tobacco consumption (Ripoll, 2012; Lenz, 2013). In addition, temperance involves balance at work, leisure, studies, exercise, internet, food intake, sexuality and others (Handysides et al., 2013). In a behavioral intervention study in which patients with type 2 diabetes mellitus underwent, patients stated that it is important to have a healthy lifestyle for a beneficial effect in controlling diabetes and that they had difficulty following a balanced diet and exercise regularly. They added that persistence and determination are necessary (Tavares et al., 2017). The domain "trust" in the perspective of this questionnaire involves not only the public involvement (frequency of religious cults) but also particularly (non-organizational religiosity) and how much this trust influences the daily choices of life.
Current research has shown how religious involvement positively influences the quality and lifestyle of several people, at various ages (Santos and Abdala, 2014; Abdala et al., 2015). Cultivating spirituality is a necessity of all human beings. It is essential to have confidence, hope and exercise spirituality, which helps to better cognitive function and keeps the brain agile and awake (Pamplona, 2014).

Regarding the first stage of this study, it is worth mentioning that, basically, all Q8RN items reached a recommendable percentage for clarity and representativeness among the judges (Figure 2). After the possession of the questionnaire restructured to 25 items, when applying the second tool of Coluci et al. (Box 2), which also aims to analyze the percentage of clarity of the title, format and instructions of the Q8RN questionnaire, it was found that there was an improvement between the first and second applications of Box 2 (Figure 3). It was observed that there was an improvement in the agreement on the title and format of the questionnaire, but doubts remained about the instructions, which may possibly be explained by the participation of other experts as judges. The new participants were included because they had more experience in constructing questionnaires and psychometric aspects, and the suggestions were incorporated in the last English version (Appendix A) and Portuguese (Appendix B).
It was sought to make a semantic equivalence (meaning of words), idiomatic (colloquial), conceptual (as different populations understand the same meaning) and experimental (within the cultural context) (Alexandre and Coluci, 2011). In evaluating the clarity and representativeness of the concept, according to the judges’ opinion, it was observed that in the first application (Figure 4), three items were 0.6 in terms of representativity and only two were below that value in clarity (Figure 4). In the second application, there were none below 0.6 and only three items were 0.6-0.8 in both classifications, indicating an improvement in the judges’ opinions for these aspects (Figure 5). The Cronbach's Alpha in the Q8RN evaluation for items was 0.92, considered excellent for an expected value of at least 0.60-0.70 (Hair et al., 2009). In terms of area coverage and the instrument as a whole, it was found that exercise, sun and rest presented percentages of 66.7%, but that in the second application these scores improved, reaching 100% in all of them (Figure 6), being adequate to what is required by the literature (Alexandre and Coluci, 2011). As far as the scope of the domains the Cronbach Alpha applied to the evaluation of the questions of the questionnaire by the judges was of 0.88. The coverage of the domains and the instrument as a whole improved, reaching an index of 1.0, showing the importance of the participation of the judges in a second moment and the maturation of the questionnaire after the changes requested by them. When analyzing the score of the domains and the total, small changes occurred between the first and second applications to the judges, without altering the understanding of the analysis (Figure 7). As the instrument is objective and have a representative character of Adventist philosophy in which temperament, food, physical exercise and trust in God are emphasized, these domains have more items and, this may have contributed to reduce the representation of the instrument as a whole, but without prejudicing the expected result.

Conclusion

The Q8RN instrument has domain agreement. It is clear and representative of the concepts presented in the 25 items, emphasizing that they propose to objectively measure the adherence of people to the habits related to the "Eight Natural Remedies". There was an improvement between the indexes found in the first and second analysis of the judges regarding the title, format, instructions, clarity and representativeness of the questionnaire. There was also an improvement between the first and second judges’ analysis of the scope of domains and the instrument as a whole. The participation of these specialists was essential in the construction of the Q8RN instrument, as well as in the proof of the representation of the proposed lifestyle model. It is recommended that its replication be done in various populations to test the reliability of this very important tool to assess adherence to the habits presented here as "Eight Natural Remedies" as essential as to be readily available for the healthy lifestyle of the human being.

REFERENCES


Figure 7. Percentage of judges’ agreement on the domains score and total Q8RN score (Version 25 items, 1st and 2nd applications). São Paulo, 2018.


https://mail.google.com/mail/u/0/?tab=wm#inbox/1621c321c10b145b?projector=1&messagePartId=0.2


## APPENDIX

### APPENDIX A - EIGHT NATURAL REMEDIES QUESTIONNAIRE

**Lifestyle Assessment for Adults and Adolescents Ages 12 Years and Older**

**Guidelines:** Mark an X that most closely matches your practice in the last three months

<table>
<thead>
<tr>
<th>Domains</th>
<th>Items</th>
<th>Questions</th>
<th>Answers categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nutrition</td>
<td>1</td>
<td>How often do you include in the main meals of the day: beans, whole grains, nuts, fruits, vegetables?</td>
<td>Almost never</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>How many meals do you take per day? (breakfast, lunch, dinner, snack, etc.)</td>
<td>4 or more</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>How do you qualify the type of food you eat the most? * Choose the most appropriate option for you.</td>
<td>Non vegetarian: Eat meat of various types more than once a week</td>
</tr>
<tr>
<td>2. Exercise</td>
<td>4</td>
<td>How many of the following items do you consume one or more times a week? (snacks, crackers, fried foods, soft drinks and sweets in general)</td>
<td>Four to five items</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>Do you practice leisure activities such as walking, cycling, playing ball, extreme sports or other hobbies and enjoyable activities?</td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>How many times a week do you do intense exercise (which makes you sweat and increase your heart rate, such as long walking, running, cycling, etc.)?</td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>How many minutes do you spend &quot;on average&quot; when you exercise intensely until you sweat?</td>
<td>None, I don’t do it</td>
</tr>
<tr>
<td>3. Water</td>
<td>8</td>
<td>How many cups (250 ml) of water do you drink daily?</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Do you use water as a remedy for home treatments when needed? (For example, hot and cold packs, ice application, inhalation, foot scrub and baths in general).</td>
<td>Never</td>
</tr>
<tr>
<td>4. Sun light</td>
<td>10</td>
<td>How often do you expose yourself to the sun for at least 15 to 20 minutes a day?</td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>11</td>
<td>In your house, are the windows and shutters open daily for sunlight and natural light?</td>
<td>Never</td>
</tr>
<tr>
<td>5. Temperance</td>
<td>12</td>
<td>Do you consider yourself balanced about time spent studying, working, internet, television, meals, friendships, sexuality, etc.?</td>
<td>No, in any of them</td>
</tr>
<tr>
<td></td>
<td>13</td>
<td>Do you drink alcohol (beer, wine, liquor, brandy, sugarcane liquor, or any other)?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

---

**Continue**
<table>
<thead>
<tr>
<th>Question</th>
<th>Response Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Do you smoke cigarettes, pipes, or do you use any tobacco smoke?</td>
<td>Yes</td>
</tr>
<tr>
<td>15 Have you used any drugs, such as marijuana, crack, cocaine, etc. in the last three months?</td>
<td>Yes</td>
</tr>
<tr>
<td>16 Do you drink drinks that contain caffeine? (coffee, black tea, green tea, mate tea, white tea or soft drinks)</td>
<td>Yes</td>
</tr>
<tr>
<td>17 Considering the places where you spend most of the time, how do you rate the quality of the air you breathe?</td>
<td>Too bad</td>
</tr>
<tr>
<td>18 Do you take deep breaths outdoors or when you need to control tension and anxiety?</td>
<td>Never</td>
</tr>
<tr>
<td>19 Do you sleep 7 to 8 hours a night and wake up rested and in good spirits most of the time?</td>
<td>Never</td>
</tr>
<tr>
<td>20 Do you usually sleep early? (around 10 pm or before that time).</td>
<td>Never</td>
</tr>
<tr>
<td>21 Do you separate one day a week to rest from routine work, home, or study?</td>
<td>Never</td>
</tr>
<tr>
<td>22 Do you trust in God? (in a Higher Self or something sacred)</td>
<td>Never</td>
</tr>
<tr>
<td>23 Does your trust in God (Higher Self or something sacred) positively influence your way of life?</td>
<td>Never</td>
</tr>
<tr>
<td>24 How often do you attend religious or spiritual meetings?</td>
<td>Rarely or never</td>
</tr>
<tr>
<td>25 Do you practice religious or spiritual activities in your private life? (meditate, pray, read the Bible or religious books, do charity, etc.)</td>
<td>Rarely or never</td>
</tr>
</tbody>
</table>

**How to calculate the total Q8RN score:**

The total Q8RN score is the sum of the points assigned to each item, that is, each question scores from zero (0) to four (4), totaling a maximum of 100 points if all 25 questions are answered. To classify Lifestyle based on the "Eight Natural Remedies", the following parameters must be considered:

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 34</td>
<td>insufficent</td>
</tr>
<tr>
<td>35 - 54</td>
<td>regular</td>
</tr>
<tr>
<td>55 - 69</td>
<td>good</td>
</tr>
<tr>
<td>70 - 84</td>
<td>very good</td>
</tr>
<tr>
<td>85 – 100</td>
<td>excellent</td>
</tr>
</tbody>
</table>

**Subscale scores**

The questionnaire consists of a total 25 items / questions and eight domains. The score for each domain will be calculated based on the number of items. The Likert scale (zero to four points in ascending order) will be used to calculate the score of each item, except: item 2 of domain 1 (Nutrition) and items 13, 14, 15 and 16 of domain 5 (Temperance) that are dichotomous (0 or 4 points). The cutoff point will be the average / median, based on the number of questions per domain, and the parameter will be between the minimum and maximum values. Example: In the Nutrition domain there are four questions / items with a rank of 0-16, being 8 the average / median (cutoff point).
## APPENDIX B – PORTUGUESE VERSION - QUESTIONÁRIO OITO REMÉDIOS NATURAIS – Q8RN

### Avaliação do Estilo de Vida de Adultos e adolescentes a partir de 12 anos

**Orientações:** Marque um X a opção que mais se aproxima da sua prática nos últimos três meses.

<table>
<thead>
<tr>
<th>Domínios</th>
<th>Itens</th>
<th>Questões</th>
<th>Escala de Respostas</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nutrição</td>
<td>1.</td>
<td>Com que frequência você inclui nas principais refeições do dia: feijões, cereais integrais, castanhas, frutas, legumes e verduras?</td>
<td>Quase nunca Raramente Algumas vezes Muitas vezes Sempre</td>
</tr>
<tr>
<td></td>
<td>2.</td>
<td>Quantas refeições você faz por dia? (desjejum, almoço, jantar, lanche, etc.)</td>
<td>4 ou mais</td>
</tr>
<tr>
<td></td>
<td>3.</td>
<td>Como você se classifica no que se refere ao tipo de alimento que você mais consome? Escolha a opção mais adequada a seu caso.</td>
<td>Não vegetariano: Come carne de tipos variados mais de 1 vez por semana Semi Vegetariano: Come carne de tipos variados no máximo 1 vez por semana Pesco Vegetariano: Come carne, frango e outras aves menos de 1 vez por mês, e come peixe mais de 1 vez por mês Ovolacto Vegetariano: Come laticínios e ovos mais que 1 vez por mês e peixes e carnes menos que 1 vez por mês Vegetariano estrito Consome leite, queijo, ovos, peixe ou carne no máximo 1 vez por mês ou menos</td>
</tr>
<tr>
<td>2. Exercício</td>
<td>4.</td>
<td>Quanto tempo você gasta “em média” quando faz exercícios intensos até suar?</td>
<td>Nenhum, não faço 5 a 10 minutos 10 a 20 minutos 21 a 30 minutos 30 a 60 minutos</td>
</tr>
<tr>
<td></td>
<td>5.</td>
<td>Você pratica atividades de lazer, tais como caminhar, pedalar, jogar bola, esportes radicais ou outros hobbies e atividades prazerosas?</td>
<td>Nunca Quase nunca Algumas vezes Muitas vezes Sempre</td>
</tr>
<tr>
<td></td>
<td>6.</td>
<td>Quantas vezes você consome uma ou mais vezes por semana? (salgadinhos, bolachas, frituras, refrigerantes e doces de maneira geral)</td>
<td>Quatro a cinco itens Três itens Dois itens Um item Nenhum</td>
</tr>
<tr>
<td></td>
<td>7.</td>
<td>Quantas vezes por semana você pratica exercício físico intenso (que faz suar e aumenta os batimentos cardíacos, como caminhada longa, corrida, bicicleta, etc)?</td>
<td>Nunca Menos de 1 vez por semana 1 a 2 vezes por semana 3 a 4 vezes por semana 5 vezes ou mais por semana</td>
</tr>
<tr>
<td></td>
<td>8.</td>
<td>Quantos copos (250 ml) de água você bebe diariamente?</td>
<td>Nunca Quase nunca Algumas vezes Muitas vezes Sempre</td>
</tr>
<tr>
<td></td>
<td>9.</td>
<td>Você utiliza a água como remédio para tratamentos caseiros quando necessário? (Por exemplo, compressas quentes e frias, aplicação de gelo, inalação, escaldas pés e banhos em geral).</td>
<td>Nenhum, não faço 1 a 3 copos 4 a 6 copos 7 copos 8 ou mais</td>
</tr>
<tr>
<td>3. Água</td>
<td>10.</td>
<td>Com que frequência você se expõe ao sol pelo menos 15 a 20 minutos por dia?</td>
<td>Nunca Quase nunca Algumas vezes Muitas vezes Sempre</td>
</tr>
<tr>
<td></td>
<td>11.</td>
<td>Em sua casa, as janelas e persianas são abertas diariamente para que entrem sol e luz natural?</td>
<td>Nunca Quase nunca Algumas vezes Muitas vezes Sempre</td>
</tr>
</tbody>
</table>
Temperança

Você se considera equilibrado quanto ao tempo dedicado aos estudos, trabalho, internet, televisão, refeições, amizades, sexualidade, etc.?

Não, em nada

Em quase nenhum desses itens

Só em alguns desses itens

Em quase todos esses itens

Em todos esses itens

Você ingere bebida alcóolica (cerveja, vinho, licor, aguardente, pinga ou qualquer outra)?

Sim

Não

Você fuma cigarro, charuto, cachimbo ou usa fumo de rolo?

Sim

Não

Você fez uso de alguma droga, tipo maconha, crack, cocaína, etc nos últimos três meses?

Sim

Não

Você ingere bebidas que contêm cafeína? (café, chá preto, chá verde, chá mate, chá branco ou refrigerantes)

Sim

Não

6. Ar puro

Considerando os lugares onde passa a maior parte do tempo, como você classifica a qualidade do ar que respira?

Muito ruim

Ruim

Regular

Boa qualidade

Muito boa qualidade

Você faz respiração profunda ao ar livre ou quando precisa controlar a tensão e a ansiedade?

Nunca

Raramente

Algumas vezes

Muitas vezes

Sempre

7. Descanso

Você dorme de 7 a 8 horas por noite e acorda descansado(a) e com boa disposição na maioria das vezes?

Nunca

Quase nunca

Algumas vezes

Muitas vezes

Sempre

Você costuma dormir cedo? (por volta das 22h ou antes desse horário).

Nunca

Quase nunca

Algumas vezes

Muitas vezes

Sempre

8. Confiança

Você confia em Deus? (em um Ser Superior ou algo sagrado)

Nunca

Quase nunca

Algumas vezes

Muitas vezes

Sempre

Sua confiança em Deus (Ser Superior ou algo sagrado) influencia positivamente sua maneira de viver?

Nunca

Quase nunca

Algumas vezes

Muitas vezes

Sempre

20ó prática atividades religiosas ou espirituais em sua vida particular? (meditar, rezar ou orar, ler a Bíblia ou livros religiosos, fazer caridade, etc.).

Raramente ou nunca

Algumas vezes por ano

Duas a três vezes por mês

Uma vez por semana

Mais de uma vez ao dia

Duas ou mais vezes por semana

1 vez ao dia

Mais de 1 vez por semana

Mais de uma vez ao dia

Como calcular o escore total do Q8RN

O escore total do “Q8RN” é o somatório dos pontos atribuídos a cada item, ou seja, cada questão pontua de zero (0) a quatro (4), totalizando no máximo 100 pontos se respondidas todas as 25 questões. Para classificação do Estilo de Vida com base nos “Oito remédios naturais”, devem ser considerados os seguintes parâmetros:

0 - 34 – insuficiente

35 - 54 – regular

55 - 69 – bom

70 - 84 – muito bom

85 - 100 – excelente

**ESCORE DOS DOMÍNIOS**

O questionário é composto, no total, por 25 itens/questões e oito domínios. Os escores para cada domínio serão calculados com base no número de itens. Será utilizada a escala de Likert (zero a quatro pontos em ordem crescente) para calcular o escore de cada item, exceto: item 2 do domínio 1 (Nutrição) e itens 13, 14, 15 e 16 do domínio 5 (Temperança) que são dicotômicos (0 ou 4 pontos). O ponto de corte será a média/mediana, baseado no número de questões por domínio, e o parâmetro estará entre os valores mínimos e máximos.

**Exemplo:** No domínio Nutrição existem quatro questões/itens com amplitude de 0-16, sendo 8 a média/mediana (ponto de corte).

* Classificação do padrão alimentar/dietético adaptado com base em Orlich et al. (2014)