

FREE 5-DAY HEAL YOUR GUT C H A L L E N G E

DAY 1: DEFINE YOUR HEALTH JOURNEY

The fact that you are here reading this means you have committed to your health and are ready to do whatever it takes to achieve your health goals.

Our five-day challenge will kick off by giving you clarity on your past results and pushing you forward toward creating NEW results for the future.

What we have to understand is that we are where we are because of the actions we've taken and decisions we've made in the past.

Truth is that "you can't change what you're not aware of". Choose to acknowledge these things so that you can change them.

Day 1 Assignment: Please follow the prompts and answer the following questions. Avoid any judgments or opinions about your responses and choose to be in a space of awareness.

1. The health condition you're in today has some correspondence with the choices you've made up to this point.

However, many of your choices aren't your fault. We all live our lives "conditioned" by our upbringing and environment.

But since you are here, it's time to rehash what's not working and move toward changing the things you can in your life to optimize the conditions for you to begin to heal and thrive!

On the following page, you will see a line from A to B. Describe your current results under "A".

(Example: I'm struggling daily with gas, bloating, weight gain, and aches and pains. I don't feel good about myself because I feel sick and don't enjoy date nights or social gatherings because I have to suffer the consequences of the food I eat.)

Think of this as the starting point on your way toward achieving your health goals.

2. If you had a genie in a bottle asking what you wanted, and they could make anything a reality for you, what results would you wish into existence? List these under "B" on the following page.

(Example: I would fit into my skinny jeans without a muffin top and look and feel amazing while enjoying a night out with my spouse or friends.)

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A

B

Your CURRENT Results:

Your IDEAL Results:

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3. How long have you been struggling to achieve the results you listed for Question #2? How many diets, programs, supplements, etc. have you tried without lasting results?

(Example: I've tried the elimination and FODMAP diets, but they were either too restrictive or hard to maintain plus I didn't really feel different. In fact, I felt too stressed to stay on it because I was having to cook different meals for my family and myself, and it was too time consuming.)

4. What is it costing you to remain where you are right now and keep your current results?

(Example: I lack confidence, I don't want to get dressed in the morning, I can't keep up with my kids' after school activities because I'm too weak or sick half the time.)

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5. Looking to the future, if you continue to stay where you are right now, what will that look like in three years? Five years? Ten years?

(Example: I will lose my connection with those whom I love and I will not set a good example for my daughter as she gets older.)

6. How would your life look if you reached all your health goals?

(Example: I would feel like myself again, be confident, and enjoy life with my kids and spouse. I would be able to take vacations, looking and feeling my best without being self conscious or obsessed with finding the nearest bathroom, and most importantly I'd enjoy food again.)

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7. Now with your newfound health FREEDOM, what will your life be like in three years, five years, or ten years?

(Example: I am confident in who I am and have healthy boundaries with my loved ones. I'm no longer a doormat, my marriage is amazing and my kids are respectful and proud of me. I feel like I can accomplish anything I set my mind to and advance in my career. I am doing and eating things I love.)

Your assignment for Day 1 of our challenge is to answer these seven questions.

Post your response to questions 6 and 7 in the comments of the DAY 1 ACCOUNTABILITY POST in our Heal Your Gut Facebook group!