**Issue Focus Questionnaire:**

Below is a set of questions that are designed to precipitate provocative insights and thought processes as we move toward resolution. Please choose the single highest priority issue you want to address right now. I would like to have a separate form for each main issue, but we only need the highest priority to get started if you have limited time.

This form catalyzes important thought processes on the conscious and unconscious level. It will also give me specifics to work from as well as save you a good bit of session time. This is a very valuable tool we can use and refer to as we go. Please take your time in filling it out as we will be using it for quite a while. The questions [and answers] are provocative prompts and not to be underestimated.

The word “treatment” in the questions below refers to any actions you have taken toward resolution. It does not matter whether you are describing a symptom, disease, issue, event, problem, or challenge in your life. The terms are used interchangeably below. This Issue Focus Questionnaire is designed to mine gold nuggets about you, your business, personal growth, health, life, and wellbeing.

This forms expands to add a new line for more space for you answers when you hit “enter” on your keyboard.

Remember to address only one issue per form.

**1.** **Create your own personal short name** **for what you are working with, how it feels to you**. Please do not give it a disease diagnosis or professional term that others have used to describe you or your situation.

**Your personal short name here**:

**2. Description of the challenge or change you are seeking:** **Please take the time to specifically describe your responses**.

**What do you say to yourself about it**?

**Where do you see the challenge or change**?

**Is it in your body or separate**?

**If you were to give it a size, shape, color, texture, and sound, what would they be**?

**If you were to draw it, what would it look like**?

**What is the sensation**? **(dull, sharp, binding, itching, heavy, twisting, drilling, penetrating, stabbing, pounding ...**)

**3. What has aggravated it**?

**Now**?

**In the past**?

**4. What has made it better**?

**Now**?

**In the past**?

**5. History:**

**What was the first moment you decided to change your life, or when you first experienced the issue, block, pain, disease**?

**What happened**?

**What was the exact sequence**?

**The first cause or experience**?

**The subsequent re-enforcers**?

**What was going on in your life at the time**?

**In your work**?

**In your family life**?

**Financially**?

**With friends**?

**What was going on in your life a year or two before this situation**?

**What did you consider to be significantly good**?

**What do you consider to be significantly bad**?

**6. History of actions or “treatments”?**

**What prior action or treatment have you done or had, such as investments, business ventures, surgery, meds, acupuncture, herbs, prayer**…?

**What worked**?

**What didn't work**?

**What do you think could have made it work**?

**What do you think will never work**?

**7. Re-enforcers**

**What did consultants, coaches, doctors or other kinds of practitioners tell you about your situation**?

**What did friends and/or relatives say**?

**What did you tell yourself**?

**8. Impact of actions or “treatments” on your life?**

**How has this affected your life**?

**Your work**?

**Your family life**?

**Your sex life**?

**Your social life**?

**9. Beliefs**

**Do you believe that reaching your goals, changing your life, or healing is possible**?

**When and how did you come to this conclusion**?

**What is your belief *in or about your own* healing mechanism, ability to change, or to realize your goals**?

**Beliefs about moving forward, solving problems, issues, challenges, disease, symptoms, and events … itself**?

**Beliefs about the actions or treatments you are or have engaged in or received**?

**10. Secondary Gain**

**If you reach your goal(s) whether freedom from pain, disease, issues, events, life changes… and they are now gone, how would your life be differen**t?

**If they remain, how would your life be affected**?