

## Steps for Reducing Vulnerability to Emotion Mind

Due Date: \_\_\_\_\_ Name: \_\_\_\_\_ Week Starting: \_\_\_\_\_

For each emotion regulation skill, note whether you used it during the week, and describe what you did. Write on the back of this sheet if you need more room.

**ACCUMULATE POSITIVE EMOTIONS: SHORT TERM**

INCREASED daily pleasant activities (circle): M T W Th F S Sun

Describe: \_\_\_\_\_  
\_\_\_\_\_

**ACCUMULATE POSITIVE EMOTIONS: LONG TERM; BUILDING A LIFE WORTH LIVING**

VALUES considered in deciding what goals to work on (see Emotion Regulation Handout 18):

\_\_\_\_\_

LONG-TERM GOALS worked on (describe):

\_\_\_\_\_

AVOIDED AVOIDING (describe):

\_\_\_\_\_

**MINDFULNESS OF POSITIVE EXPERIENCES WHEN THEY OCCURRED**

Focused (and refocused) attention on positive experiences: \_\_\_\_\_

Distracted from worries if they showed up: \_\_\_\_\_

**BUILD MASTERY**

Scheduled activities to build a sense of accomplishment (circle): M T W Th F S Sun

Describe: \_\_\_\_\_

Actually did something difficult, **BUT** possible (circle): M T W Th F S Sun

Describe: \_\_\_\_\_

**COPE AHEAD**

Describe a situation that prompts unwanted emotions (fill out Steps 1 and 2 of checking the facts on Emotion Regulation Worksheet 5 if necessary):

\_\_\_\_\_

Way that I imagined coping effectively (describe):

\_\_\_\_\_

Way that I imagined coping with new problems that might arise (describe):

\_\_\_\_\_

*(continued on next page)*

# PLEASE

Skills

Have I . . .

**Treated Physical illness?** \_\_\_\_\_

\_\_\_\_\_

**Balanced Eating?** \_\_\_\_\_

\_\_\_\_\_

**Avoided mood-Altering substances?** \_\_\_\_\_

\_\_\_\_\_

**Balanced Sleep?** \_\_\_\_\_

\_\_\_\_\_

**Exercised?** \_\_\_\_\_

\_\_\_\_\_