

DAILY EMOTION INTENSITY DIARY CARD

Review the emotion intensity scale then mark each box 0-5 daily

WEEK 1

Day: Date	Sad	Anger	Fear	Shame	Joy	Pain	Urges
Mon:							
Tue:							
Wed:							
Thu:							
Fri:							
Sat:							
Sun:							

WEEK 2

Day: Date	Sad	Anger	Fear	Shame	Joy	Pain	Urges
Mon:							
Tue:							
Wed:							
Thu:							
Fri:							
Sat:							
Sun:							

INTENSITY SCALE

SADNESS: (hurt, lonely, disappointed, depressed, teary, heartbroken, despair, grieving, hopeless)

0	Did not feel even slightly disappointed today.
1	Felt brief sadness, hurt or disappointment. Fleeting. Doesn't stay on my mind for very long. Does not affect my behavior. EX: Seeing something on the news that affects me in that moment but I do not think about it for the rest of the day.
2	Felt somewhat hurt, lonely or disappointed today. Uncomfortable. Stayed on my mind for a short period of time or popped back up throughout the day. Does not consume me. Though it may feel intense when it happens, it does not affect my behavior (or only slightly affects my behavior in the moment). May frown or have a sad look on my face. May sigh or express disappointment to others. EX: Someone canceled plans, said "no" or I didn't get something I had expected.
3	Felt sadness, hurt or disappointment today. Upsetting. May express it with tone of voice changes, tears, talking about it to others, etc. May affect my behavior (short with people, isolate, cancel an appointment, avoid a responsibility, etc.). May have urges to act out but I do not act on them.
4	Feeling of intense sadness, hopelessness or despair. Overwhelming. May overthink or ruminate about it or may dissociate or check out. May feel like I am out of control or I am going to lose control soon. May feel like I can't function. Sadness influences but does not drive my behavior. EX: I may react by refusing help from people who care, isolating, cancelling appointments, crying easily, avoiding responsibilities, etc. Though I may have intense urges to act out in the extreme (yell, hide, run away, hurt myself, use substances, end a relationship, quit a job, or do something else that puts me at risk), I do not act out in the extreme.
5	Intense despair or hopelessness drives my behavior to the point where I act out in the extreme. Out of control. My actions result in significant regret or consequences. EX: I may harm myself, numb my feelings with substances/shopping/food. I may end a relationship, quit a job or say something that is hurtful or do something that puts me at risk.

ANGER: (frustrated, bitter, irritated, livid, outraged, resentful, annoyed, vengeful, rage)

0	Did not feel even slightly annoyed or irritated today.
1	Felt briefly annoyed or irritated. Fleeting. Doesn't stay on my mind for very long. Does not affect my behavior. EX: Seeing something on the news that affects me in that moment but I do not think about it for the rest of the day.
2	Felt somewhat frustrated or annoyed. Uncomfortable. Stayed on my mind for a short period of time or popped back up throughout the day. Does not consume me. Though it may feel intense when it happens, it does not affect my behavior (or only slightly affects my behavior in the moment). May frown or roll my eyes. May sigh or express frustration to others. EX: Spending time with someone I don't get along with, paying bills, cleaning up after somebody else, etc.
3	Felt angry or frustrated today. Upsetting. May express it with tone of voice changes, tears, talking about it to others, etc. May affect my behavior (short with people, isolate, cancel an appointment, avoid a responsibility, etc.). May have urges to act out but I do not act on them.
4	Anger or frustration is intense. Overwhelming. May overthink or ruminate about it or may dissociate or check out. May feel like I am out of control or I am going to lose control soon. May feel like I can't function. Anger influences but does not drive my behavior. EX: I may react by refusing help from people who care, isolating, cancelling appointments, crying easily, avoiding responsibilities, etc. Though I may have intense urges to act out in the extreme (yell, hide, run away, hurt myself, use substances, end a relationship, quit a job, or do something else that puts me at risk), I do not act out in the extreme.
5	Intense anger is driving my behavior to the point where I act out in the extreme. Out of control. My actions result in significant regret or consequences. EX: I may yell at someone, throw something, harm someone or myself. I may numb my feelings with substances or food, end a relationship, quit a job, or do something else that puts me at risk.

FEAR (anxious, worried, afraid, hesitant, dread, uneasy, distressed, concerned)

0	Did not feel even slightly concerned about anything today.
1	Felt brief hesitation or uneasiness today. Fleeting. Doesn't consume me. EX: Seeing something on the news that makes me anxious in that moment but I do not think about it for the rest of the day.
2	Felt somewhat anxious today. Uncomfortable. Stayed on my mind for a short period of time or popped back up throughout the day. Does not consume me. Though it may feel intense when it happens, it does not affect my behavior (or only slightly affects my behavior in the moment). May sigh or express uneasiness to others.. EX: Worried about a friend who is going through a tough time or feeling stressed while driving.
3	Felt anxious or worried today. Upsetting. May express it with tone of voice changes, tears, talking about it to others, etc. May affect my behavior (short with people, isolate, cancel an appointment, avoid a responsibility, etc.). May have urges to act out but I do not act on them.
4	Anxiety or fear is intense. Overwhelming. May overthink or ruminate about it, may feel a sense of panic, or may dissociate or check out. May feel like I am out of control or I am going to lose control soon. May feel like I can't function. Worry thoughts influence but do not drive my behavior. EX: I may react by refusing help from people who care, isolating, cancelling appointments, crying easily, avoiding responsibilities, etc. Though I may have intense urges to act out in the extreme (yell, hide, run away, hurt myself, use substances, end a relationship, quit a job, or do something else that puts me at risk), I do not act out in the extreme.
5	Intense fear is driving my behavior to the point where I act out in the extreme. Out of control. My actions result in significant regret or consequences. EX: I may have a panic attack or flashback, scream, cut off all contact with others, harm myself, numb my feelings with substances/shopping/food. I may end a relationship, quit a job, or do something else that puts me at risk.

SHAME (guilty, embarrassed, remorseful, humiliated, self-doubt, rejected, judged) *Negative feelings toward self*

0	I have zero negative thoughts about myself today. If I make a mistake, I do not feel bad about it.
1	I feel embarrassed or guilty if I make a mistake and/or I have fleeting negative thoughts about myself today. These feelings don't last long, don't consume me and don't affect my behavior. EX: Apologizing for spilling something or thinking, "That was dumb" about myself in a lighthearted way. <i>I know that that I am a good person despite my faults.</i>
2	Felt somewhat embarrassed and/or had some negative thoughts about myself today. Uncomfortable. Stayed on my mind for a short period of time or popped back up throughout the day. Does not consume me. Though it may feel intense when it happens, it does not affect my behavior (or only slightly affects my behavior in the moment). EX: I made a mistake or a bad choice. <i>Despite this, I know that I am a good person and accept that I am only human.</i>
3	I struggle with guilt, regret and/or negative feelings about myself today. Upsetting. I may be critical of myself throughout the day. My self-esteem may be low. May affect my behavior (short with people, isolate, cancel an appointment, avoid a responsibility, etc.). May have urges to act out but I do not act on them. <i>Though my confidence may be low today I still know in my heart that I am a good person.</i>
4	Negative feelings about myself and/or guilt about something I've done is frequent and intense. May overthink or ruminate about it, feel bad about myself, or may dissociate or check out. May feel like I am out of control or I am going to lose control soon. May feel like I can't function. Guilt and/or shame influences but does not drive my behavior. EX: I may refuse help from people who care, isolate, cancel appointments, cry easily, avoid responsibilities, etc. Though I have urges to act out in the extreme (yell, hide, run away, hurt myself, use substances, etc), I do not act on them. <i>I may think about all of the bad things I have done in my life and struggle to feel worthy.</i>
5	Self-hatred and/or intense regret drives my behavior to the point where I act out in the extreme. Out of control. My actions result in significant regret or consequences. EX: I may hurt myself, cut off all contact with others, numb my feelings with substances/shopping/food. I may end a relationship, quit a job, or do something else that puts me at risk. <i>I am focused on the negative aspects of myself and I am unable to see my worthiness.</i>

JOY (happy, content, amused, motivated, hopeful, grateful, peaceful, thrilled, pleased)

5	An intense feeling of goodness for the majority of the day. Though negative emotions may also be present, my focus is on the positive. I may feel especially worthy or loved or important. I am extremely grateful for what I have and optimistic about my future. EX: getting a promotion, receiving a gift, hearing, "I love you" from a person that really matters or simply enjoying the sunset or being grateful for my family.
4	I enjoyed myself today. I may have felt connected to others or hopeful about the future. I may have accomplished something. EX: spending time with people who care about me or doing something that I love to do.
3	I felt relatively good today even though I may have experienced negative thoughts, emotions or emptiness at times. Ex: Felt good while talking to friends or family on the phone, watching my favorite show or listening to my favorite music.
2	I smiled, laughed and/or I felt positive about something at some point during the day even on a small scale. Ex: I felt good about finishing the laundry or someone was kind to me.
1	Smiled genuinely or laughed at least once or twice today but the rest of the day was dominated by a feeling of emptiness, numbness, spacing out or negative thoughts and emotions.
0	No joy at all. Did not smile unless it was forced. Did not laugh at all today, not even at something on TV or a friend's joke and I do not express a sense of humor. All interaction with others was negative or I did not have contact with anyone at all today.

URGES to act out negatively (actions that result in regret or consequences)

0	I did not feel a desire to act on negative urges today.
1	Felt a brief desire to act on negative urges. It was fleeting. It didn't consume me
2	The desire to act on negative urges stays on my mind for a short period of time or pops back up throughout the day, but it doesn't consume me. I am able to control my thoughts/behavior and the urge doesn't last.
3	Felt a strong desire to act on negative urges today. It is difficult to control my thinking. <i>I may or may not make a plan to act</i> on my urges, but I am able to control my behavior and I do not act.
4	The desire to act on negative urges is intense. I am ruminating about it. It's overwhelming. I feel like I am out of control or I am going to lose control soon. <i>I make a plan to act</i> on my negative urges but in the end, I do not follow through.
5	<i>I acted</i> on my urge today. My behavior results in regret or consequences.

PAIN

0	I was not aware of my pain today or I did not have any pain today.
1	Aware of pain once or twice today but it did not stay on my mind for long.
2	I am aware of mild to moderate pain today. I am able to distract from it and/or it doesn't stay on my mind for a long period of time.
3	Ongoing and at times intense pain is felt throughout the day. Though it is disruptive, I am still able to perform most of my normal tasks.
4	Pain is intense. It lasts throughout the day and disrupts my ability to function to the point where I am limited or unable to perform my normal tasks.
5	Intense, unrelenting pain. EX: Physical trauma from broken bone, car accident, kidney stones. Pain is intolerable. Symptoms may include: shock, sweating, vomiting, etc.