What you do-how you feel

* 5

Check out the link between what you do and how you feel. Fill out this diary for a few days and rate your feeling throughout the day.

1 10 20 30 40 50 60 70 80 90 100

Very weak Very strong

|  |  |  |  |
| --- | --- | --- | --- |
| Day  | What were you doing, where, who with | How did you feel | How strong was the feeling? |
| **7 - 8 am** |  |  |  |
| **8 - 9 am** |  |  |  |
| **9 - 10 am** |  |  |  |
| **10 - 11 am** |  |  |  |
| **11 – 12 am** |  |  |  |
| **12 – 1 pm** |  |  |  |
| **1 - 2 pm** |  |  |  |
| **2 - 3 pm** |  |  |  |
| **3 - 4 pm** |  |  |  |
| **4 - 5 pm** |  |  |  |
| **5 – 6 pm** |  |  |  |
| **6 – 7 pm** |  |  |  |
| **7 – 8 pm** |  |  |  |
| **8 – 9 pm** |  |  |  |
| **9 – 10 pm** |  |  |  |
| **10 – 11 pm** |  |  |  |
| **11 -12 pm** |  |  |  |
| **12 – 1 am** |  |  |  |

Are there any patterns? What are you doing when your unpleasant feelings are strong and when they are weak?