

Mood Management Self-Assessment

Name: _____ Date: _____

Use the following scale to answer the questions below:

- 1 Disagree Completely
- 2 Disagree Somewhat
- 3 Neither Agree nor Disagree
- 4 Agree Somewhat
- 5 Agree Completely

SCORE: _____

In the last week, I have not engaged in any of the following:

Verbal Abuse (Yelling, screaming, cursing) 1 2 3 4 5

Emotional Abuse (Manipulation, Shaming and Blaming) 1 2 3 4 5

Physical Abuse (punching, kicking, hitting, pushing, etc.) 1 2 3 4 5

In the past week, I have been able to make the following changes:

I have been able to recognize when my emotions are out of control 1 2 3 4 5

I have stopped trying to control others 1 2 3 4 5

I have learned to express my emotions in positive ways 1 2 3 4 5

I have learned to express other emotions besides anger 1 2 3 4 5

I have learned to listen better 1 2 3 4 5

I have learned not to assume what other people may be thinking and/or feeling about a given situation 1 2 3 4 5

I have developed respect for myself and others 1 2 3 4 5

I have learned to take care of my own emotional needs 1 2 3 4 5

I have learned that I am responsible for my own emotional security and wellbeing 1 2 3 4 5

I have stopped trying to win every argument 1 2 3 4 5

I have learned to be more positive 1 2 3 4 5

I have learned to give more support and praise to others 1 2 3 4 5

I have learned to relax and to be more patient 1 2 3 4 5

I have learned to ask for help when I need it 1 2 3 4 5

Signature: _____ Date: _____