

Brief Mood Survey + Relationships Robert Davies Counselling & Consulting © David Burns 2018

Name _____ Date _____

BEFORE SESSION. Circle how depressed, anxious or angry you feel now.

Please answer all the items.					
	Not at All	Somewhat	Moderately	A Lot	Extremely
Depression					
1. Sad or down in the dumps	0	1	2	3	4
2. Discouraged or hopeless	0	1	2	3	4
3. Low self esteem	0	1	2	3	4
4. Worthless or inadequate	0	1	2	3	4
5. Loss of pleasure or satisfaction with life	0	1	2	3	4
TOTAL					

Suicidal

1. Do you have any suicidal thoughts?	0	1	2	3	4
2. Would you like to end your life?	0	1	2	3	4

Anxiety

1. Anxious	0	1	2	3	4
2. Frightened	0	1	2	3	4
3. Worrying about things	0	1	2	3	4
4. Tense or on edge	0	1	2	3	4
5. Nervous	0	1	2	3	4
TOTAL					

Anger

1. Frustrated	0	1	2	3	4
2. Annoyed	0	1	2	3	4
3. Resentful	0	1	2	3	4
4. Anger	0	1	2	3	4
5. Irritated	0	1	2	3	4
TOTAL					

Relationship Satisfaction

<i>Use Check Marks to show how satisfied or dissatisfied you feel in your <u>closest</u> personal relationship.</i>	Dissatisfied				Satisfied		
	Very	Moderately	Somewhat	Neutral	Somewhat	Moderately	Very
1. Communication and openness	0	1	2	3	4	5	6
2. Resolving Conflicts and arguments	0	1	2	3	4	5	6
3. Degree of affection and caring	0	1	2	3	4	5	6
5. Intimacy and closeness	0	1	2	3	4	5	6
5. Overall Satisfaction	0	1	2	3	4	5	6
TOTAL							

Brief Mood Survey + Relationships Robert Davies Counselling & Consulting Services © David Burns

Name _____ Date _____

AFTER SESSION Circle how depressed, anxious or angry you are feeling now. Answer all items.

	Not at All	Somewhat	Moderately	A Lot	Extremely
Depression					
1. Sad or down in the dumps	0	1	2	3	4
2. Discouraged or hopeless	0	1	2	3	4
3. Low self esteem	0	1	2	3	4
6. Worthless or inadequate	0	1	2	3	4
5. Loss of pleasure or satisfaction with life	0	1	2	3	4
TOTAL					

Suicidal

1. Do you have any suicidal thoughts?	0	1	2	3	4
2. Would you like to end your life?	0	1	2	3	4

Anxiety

1. Anxious	0	1	2	3	4
2. Frightened	0	1	2	3	4
3. Worrying about things	0	1	2	3	4
4. Tense or on edge	0	1	2	3	4
5. Nervous	0	1	2	3	4
TOTAL					

Anger

1. Frustrated	0	1	2	3	4
2. Annoyed	0	1	2	3	4
3. Resentful	0	1	2	3	4
4. Anger	0	1	2	3	4
5. Irritated	0	1	2	3	4
TOTAL					

Relationship Satisfaction

<i>Circle how satisfied or dissatisfied you feel in your closest personal relationship.</i>	Dissatisfied				Satisfied		
	Very	Moderately	Somewhat	Neutral	Somewhat	Moderately	Very
1. Communication and openness	0	1	2	3	4	5	6
2. Resolving Conflicts and arguments	0	1	2	3	4	5	6
3. Degree of affection and caring	0	1	2	3	4	5	6
7. Intimacy and closeness	0	1	2	3	4	5	6
5. Overall Satisfaction	0	1	2	3	4	5	6
TOTAL							

Name _____ Date _____

BEFORE SESSION

Brief Mood Survey + Cravings – Use checks to indicate how you are feeling **right now**. Please answer all the items.

	Not at All	Somewhat	Moderately	A Lot	Extremely
Depression					
1. Sad or down in the dumps	0	1	2	3	4
2. Discouraged or hopeless	0	1	2	3	4
3. Low self-esteem, inferiority, or worthlessness	0	1	2	3	4
4. Loss of motivation to do things	0	1	2	3	4
5. Loss of pleasure or satisfaction with life	0	1	2	3	4
TOTAL					

Anxiety

1. Anxious	0	1	2	3	4
2. Frightened	0	1	2	3	4
3. Worrying about things	0	1	2	3	4
4. Tense or on edge	0	1	2	3	4
5. Nervous	0	1	2	3	4
TOTAL					

Anger

1. Frustrated	0	1	2	3	4
2. Annoyed	0	1	2	3	4
3. Resentful	0	1	2	3	4
4. Anger	0	1	2	3	4
5. Irritated	0	1	2	3	4
TOTAL					

Cravings and Urges to Use

	Not at all true	Slightly True	Moderately True	Very True	Completely True
1. Sometimes I crave drugs or alcohol.	0	1	2	3	4
2. Sometimes I have the urge to use drugs or alcohol.	0	1	2	3	4
3. Sometimes I really want to use drugs or alcohol.	0	1	2	3	4
4. Sometimes It's hard to resist the urge to use drugs or alcohol.	0	1	2	3	4
5. Sometimes I have to struggle with the temptation to use drugs or alcohol.	0	1	2	3	4
TOTAL					

Name _____ Date _____

AFTER SESSION

Brief Mood Survey + Cravings – Use checks to indicate how you are feeling **right now**.

Please answer all the items.

	Not at All	Somewhat	Moderately	A Lot	Extremely
<i>Depression</i>					
1. Sad or down in the dumps	0	1	2	3	4
2. Discouraged or hopeless	0	1	2	3	4
3. Low self-esteem, inferiority, or worthlessness	0	1	2	3	4
5. Loss of motivation to do things	0	1	2	3	4
5. Loss of pleasure or satisfaction with life	0	1	2	3	4
TOTAL					

<i>Anxiety</i>					
1. Anxious	0	1	2	3	4
2. Frightened	0	1	2	3	4
3. Worrying about things	0	1	2	3	4
4. Tense or on edge	0	1	2	3	4
5. Nervous	0	1	2	3	4
TOTAL					

<i>Anger</i>					
1. Frustrated	0	1	2	3	4
2. Annoyed	0	1	2	3	4
3. Resentful	0	1	2	3	4
4. Anger	0	1	2	3	4
5. Irritated	0	1	2	3	4
TOTAL					

Cravings and Urges to Use

	Not at all true	Slightly True	Moderately True	Very True	Completely True
1. Sometimes I crave drugs or alcohol.	0	1	2	3	4
2. Sometimes I have the urge to use drugs or alcohol.	0	1	2	3	4
3. Sometimes I really want to use drugs or alcohol.	0	1	2	3	4
4. Sometimes it's hard to resist the urge to use drugs or alcohol.	0	1	2	3	4
5. Sometimes I have to struggle with the temptation to use drugs or alcohol.	0	1	2	3	4
TOTAL					