EMO Emotion Regulation Interview www.anabelgonzalez.es

| Name of the patient: | |
|----------------------|--|
| Age Data: | |
| Observations: | |
| | |
| | |

1) How your emotions are regulated

How would you generally define the way you regulate your emotions? Give a brief description.

Do you find it difficult to feel your emotions the same way that others do? Explain.

Which emotions do you have the most difficulty with? Which ones are difficult for you to notice? Which ones are difficult for you to deal with, or to regulate? Which ones do you find difficult seeing others express? Place a check mark to indicate which ones they are, and explain why underneath.

| Boredom | Effort | Anger | Jealousy |
|------------|-------------|------------|--------------|
| Admiration | Excitement | Envy | Joy |
| Apathy | Gratitude | Loneliness | Pain |
| Disgust | Patience | Sadness | Rejection |
| Calm | Uncertainty | Shame | Satisfaction |
| Tiredness | Fear | Safety | |
| Affection | Optimism | Other: | |

Do you find any of these trends frequent in you? Place a check mark next to all those which apply to how you function:

- I avoid feeling certain things.
- I tend to suppress or nullify certain emotions.
- Some of my emotions become overwhelming.
- I try to control my emotions as much as I can.
- Sometimes emotions come to me that do not seem mine.
- I wish I felt more than what I feel.
- The emotions of others tend to infect me.
- My emotions are always just below the surface
- My emotions are too intense.

- I am not very emotional, or that is what others say about me.
- I get angry with myself for feeling certain emotions.
- Sometimes I am ashamed of my feelings.
- My feelings can change from one moment to the next.
- In general I don't know what I feel.
- I feel things that I shouldn't feel.
- I feel emotionally numb.
- I go over my feelings again and again.
- Other (describe).

Have you always functioned this way, or did this start at a particular period in your life? If things did change for you at a particular moment, describe what was going on at that time in your life that led to a change in your functioning.

Did things get worse at any particular point? If so, describe (briefly) when it was and what your life was like at that time.

2) Regulatory Figures

Who were the people you were raised by?

Did you always live with them, or was there a change in the people you lived with?

Were there other significant figures in your life apart from your family?

Were you cared for by nannies or hired caretakers during any period? If so, how much time did you spend with them?

Did you ever live at a boarding school, or other kind of institution?

Were you adopted, or did you ever live in foster care or with a host family?

Was there a figure in your childhood or adolescence that played an important role in your life? This may have been a teacher, a certain friend, a romantic partner during

adolescence, or someone apart from the people you lived with.

Choose from all of these people described before those that you consider most relevant in your life. By relevant this means people who had an influence, whether good or bad, on your emotions and your way of bonding with others.

- Figures who had a positive influence:
- Figures who had a negative influence:
- Figures who should have been there emotionally, but who were not:

Lastly, take some time to look for at least 10 moments from your life in which you felt **someone helped you with an emotional state**. This could be someone with whom you shared a moment of happiness or sadness, a person who helped you deal with a difficult emotion, or someone who was a model for you of how to do so. It is not required that these people were always there, or that they played a significant role in your life. Likewise, it is also not required that these were common situations that occurred many times. These are just small moments during which you felt another living being (this includes people as well as animals) helped you with your emotions.

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| 9 | |
| 10 | |

This part of the interview will be filled out by a therapist or evaluator Separately evaluate each one of the patient's relevant figures

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THIS PERSON'S RELATIONSHIP WITH THE PATIENT:

Describe the first memory that you have of this person.

What was the typical expression on their face?

If you still have a relationship with this person, what is that relationship like now?

If this person is not a part of your life now, what is that? Describe how you reacted to that loss, and how those around you reacted to it: did anyone speak with you about it? Was the issue avoided? Did anyone care about how you were feeling? Give an example:

Write five adjectives that describe your **relationship** with that person during your childhood/adolescence, and give an example of each adjective:

| Adjective | Example |
|-----------|---------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |

How would that person react when you were not feeling well emotionally, or had a www.anabelgonzalez.es

problem? What would they do? Would you seek out that person? Describe the sequence of what would usually take place.

How would that person react to your successes or your failures? What would they do when you got good grades, or excelled at something? How would they react when you made a mistake? How would they correct any of your bad behavior? Describe.

Did this person help you in any way with an important situation that you experienced during your childhood or adolescence? If so, how did they help you?

Circle the words that describe how this person made you feel during your childhood and/or adolescence (include all feelings that apply, even if just occasionally):

| Understood | Rejected | Accepted |
|------------|------------|-----------|
| Frightened | Valued | Unsafe |
| Invisible | Ashamed | Special |
| Humiliated | Important | Betrayed |
| Useless | Ridiculous | Protected |
| Supported | Guilty | Safe |
| Other: | | |

Choose out of the previous words the one that you consider most important regarding the relationship with that person, and describe an example:

People have different emotional states and some people do better with some of those states than with others. Respond, with regard to that figure in your life, to each one of the states, place a check mark in all the squares that correspond to the following:

| | With regard to that person | | That person with regard to me | |
|-----------|--|---|-------------------------------------|----------------------------------|
| | It was common to seem them like this | It was uncommon to see them like this | Accepted that I was like this | Did not like to see me like this |
| Нарру | | | | |
| Sad | | | | |
| Angry | | | | |
| Afraid | | | | |
| Ashamed | | | | |
| Disgusted | | | | |
| Worried | | | | |

Which one of these emotions did this person tolerate the least in themselves? Give an example.

Which one of these emotions did this person tolerate the least in you? Describe briefly.

Regarding the emotion that that person did worse with when you felt it, what would they do when you felt this way? Mark all those that occurred:

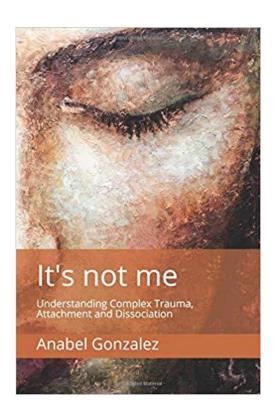
- They would tell me: "There's no need for you to get like this."
- They would tell me: "It doesn't matter."
- They would get angry.
- They would make me feel ashamed of feeling that way.
- They would get upset and sad if I felt that way.
- They would excessively worry and get overwhelmed.
- They would stop speaking to me, or ignore me.
- They wouldn't even realize how I was feeling.
- They would make me feel guilty for feeling that way.
- Other (explain).

Would this person help you feel better when you were physically unwell? How so?

Would this person help you feel better when you were **emotionally** unwell? How so? Describe a situation: how you felt, if you sought out that person, if that person realized how you were feeling, if they and you talked about it or not, if they comforted you, if they helped you understand what was going on...

Is there anything else about that person that you think is important to mention?

RELATED READING



A book about Complex Trauma, Attachment and Dissociation. It can be used as a self-understanding guide for patients and their relatives.

Instagram: @AnabelGonzalez_English

Instructions for interviewers and clinicians:

Depending on the patient, we may choose to do a direct assessment of this area, either because the person has very little awareness of their difficulties or of the meaning of their experiences, or because we believe that filling out the questionnaire by themselves can be overwhelming for the patient.

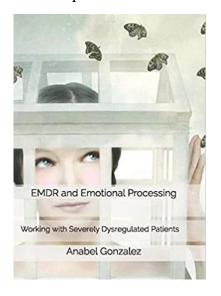
An alternative option is to ask them to come one hour before the appointment to complete the questionnaire in our office, and then have the opportunity to review it with them and help them regulate if necessary.

The first few questions evaluate some aspects of how the patient regulates their emotions. This information can be supplemented with specific questionnaires and also with the therapist's observations. We have to keep in mind that many patients are unaware of their emotional difficulties. It is easier for the observer to identify the problems the patient has when it comes to perceiving emotions consistent with what they are describing, versus the patient filling out the questionnaire on their own.

Once—with these questions, questionnaires and direct observation—we have an assessment of the patient's style of regulation, we go on to look for information on where they have learned that way of modulating their emotions. This second part will be always explored through direct interview.

This exploration must be carefully modulated in subjects with very dysfunctional attachment and significant levels of early trauma. Delving into these aspects can be overwhelming, and many people are not able to say that they need to stop, if the therapist does not carefully titrate the evaluation.

The interview must have a slow pace, inviting the patient to pause and think, and helping them if they get stuck. We must always achieve a specific detailed memory or a representative example of a situation, it allows us to contrast what the patient tells us about a person, with what the details they describe tell us.



More about the Emotional Processing Interview and the clinical work with this instrument in the book *EMDR* and *Emotional Processing*. Working with Severely Dysregulated Patients. Anabel Gonzalez.

More resources:

Youtube Channel: Anabel Gonzalez TAD

www.anabelgonzalez.es Twitter: @ItsNotMe_Book