Objective:
The objective of our research is to identify group differences in emotional regulation (ER) strategy use between individuals with high levels of schizotypal traits and individuals with low levels of schizotypal traits. We will focus on investigating group differences in the frequency of using different ER strategies, the effectiveness of different ER strategies, and the goals for regulating negative emotions in everyday life.

Literature Review:
Schizotypy is conceptualized as a multidimensional continuum of traits and characteristics associated with an elevated risk of developing schizophrenia-spectrum disorders and related to a range of emotional abnormalities. The positive dimension of schizotypy is associated with increased levels of abnormal perceptual experiences, which is related to increased attention to negative emotions and stressful experiences (McCormick et al., 2012). The negative dimension of schizotypy is associated with the presence of social anhedonia, which is related to deficits in attention to positive emotions (McCormick et al., 2012). Research indicates that irregularities in attention to affect may ultimately influence emotional regulation (ER) functioning as well as an individual's ideal affective states, or their desired emotional states (Lai et al., 2022). As a result, people at-risk for schizophrenia-spectrum disorders tend to report a range of abnormalities related to emotional experiences, emotion regulation, and emotion goals in the lab (Lai et al., 2022; Berenbaum et al., 2006; Martin et al., 2011), yet it is still unclear how these facets interact in daily life.

Within the schizotypy continuum and spanning these two dimensions are schizotypal personality traits, or traits that characterize schizotypal personality disorder, a disorder that is phenotypically similar to schizophrenia (Chun et al., 2015). While elevated schizotypal traits are predictive of the development of schizotypal personality disorder, these traits are also predictive of the development of schizophrenia-spectrum disorders in general (Chun et al., 2015). Thus, people with extreme levels of schizotypal traits are considered to be at a heightened risk for future schizophrenia-spectrum disorders (Chun et al., 2015). Extant research has found that individuals at-risk for schizophrenia-spectrum disorders tend to have a greater bias toward negative emotions due to the increased attention to negative experiences and stimuli (Li et al., 2019). Moreover, even in the presence of neutral and pleasant settings, studies have found that individuals at-risk for schizophrenia-spectrum disorders report higher levels of negative reactions and emotions, which may be related to difficulties with accurate emotion recognition in this group (McCormick et al., 2012). Also, individuals with heightened schizophrenia-spectrum symptoms who report attentional abnormalities related to emotions also report greater high arousal negative ideal affect and lower high arousal positive ideal affect, indicating a greater desire to experience high-intensity negative emotions and limited desire to experience high-intensity positive emotions (Lai et al., 2022). Therefore, overall, people at-risk for schizophrenia spectrum disorders seem to pay more attention to, and may be more motivated to experience, negative emotions in their daily lives.
While researchers have found that people at-risk for schizophrenia-spectrum disorders demonstrate small to large magnitude difficulties with ER across broader domains of strategies (e.g., nonacceptance, goals; Lai et al., 2022), the literature regarding emotional regulation strategy use in individuals with elevated schizotypal traits is limited. There are few studies that investigate what kinds of ER strategies this population is likely to utilize in response to their emotions in everyday life or what their goals are when engaging in ER strategies in real world settings. However, across the laboratory studies that do dissect ER in those with elevated schizotypal traits, there appear to be abnormalities in ER effectiveness in this group. Studies show that subjective reporting directly from those with schizotypal traits show ER disruptions at a level similar to those with persisting psychotic illnesses (Li et al., 2019). Research has also found an association between schizotypal traits and the use of maladaptive ER strategies, specifically avoidant coping strategies (MacAulay & Cohen, 2013), which are less effective in the general population at modulating both positive and negative emotions (Heiy & Cheavens, 2014). Overall, extant literature has found that, compared to typically functioning individuals, individuals with high schizotypal traits appear to be more likely to use avoidant ER strategies and are less likely to be successful in changing or reducing the intensity of their emotions. However, it is unclear which avoidance-related ER strategy or strategies individuals with elevated schizotypal traits use (e.g., expressive suppression, emotional suppression, denial, substance use), if any, in naturalistic settings. Furthermore, it is unknown whether people with elevated traits are more or less effective at implementing ER strategies to change their emotion type (e.g., sad to calm) than people with low schizotypal traits. Therefore, our proposed study will address these gaps in the literature using experience sampling surveys in daily life.

In terms of motivation to seek out or maintain emotional experiences, which is related to one’s ideal affective states, our search found one study that indicated that people at an elevated risk for schizophrenia-spectrum disorders prefer negative affect more than people who are not at-risk (Lai et al., 2022). These findings may imply that, in the context of emotion regulation, ER strategy use may be used to maintain elevated negative affective states in daily life. Given that there is limited research on goals for regulating negative emotions in individuals with elevated schizotypal traits in comparison to individuals with low schizotypal traits, our study aims to investigate these groups’ motivations for ER in daily life.

Our study plans to address these gaps in the research and to expand on knowledge regarding goals for ER use and identifying successful ER strategies with this study population. We plan to examine the use of 20 different ER strategies, specifically how frequently they are used and how effectively they impact negative emotion intensity and type during a 7-day period. To do this, we will utilize a self-report, momentary measure of recent emotional experiences, ER use frequency, effectiveness, and goals, as research methods relying on objective measures are less effective in capturing emotional experiences and regulation (Li et al., 2019, Stone & Shiffman, 2002). Understanding why individuals with heightened levels of schizotypal traits engage in different ER strategies, as well as which strategies are successful and unsuccessful in real world settings, is critical in developing our understanding of emotional experiences in people at-risk for schizophrenia and when developing interventions to reduce unpleasant or uncomfortable experiences in daily life for this vulnerable population (Kimhy et al., 2012).
Research Questions:
1. Do people with high levels of schizotypal traits report a greater frequency of ER strategy use in response to negative emotions in comparison to people with low levels of schizotypal traits in daily life?
2. Do people with high levels of schizotypal traits report less effective ER strategy use in response to negative emotions in comparison to people with low levels of schizotypal traits in daily life?
3. Do people with high levels of schizotypal traits report different goals for regulating negative emotions in comparison to people with low levels of schizotypal traits in daily life?

Research Aims and Hypotheses:
Aim 1: To investigate high versus low schizotypal trait group differences in the frequency of emotion regulation strategy use—both by strategy and overall—in response to negative emotion experiences in daily life. We hypothesize that the high-scoring schizotypal trait group will have a higher frequency of ER strategy use—overall and for avoidance-related strategies—to regulate negative emotions in comparison to the low schizotypal traits group.

Aim 2: To investigate high versus low schizotypal trait group differences in the effectiveness of specific emotion regulation strategies used (to change or maintain emotion intensity, to change emotion type) in response to negative emotion experiences in daily life. We hypothesize that the high-scoring schizotypal trait group will report lower effectiveness rates for ER strategies in changing or maintaining emotion intensity and in changing emotion type in response to negative emotions in comparison to the low schizotypal traits group.

Aim 3: To investigate high versus low schizotypal trait group differences in the frequency of selecting various goals for using emotion regulation strategies in response to negative emotion experiences in daily life. We hypothesize that the high-scoring schizotypal trait group will have a lower frequency of endorsing any emotion goals for ER strategies in response to negative emotions in comparison to the low schizotypal traits group.

Sampling Plan:
We will recruit 40 participants with high schizotypal traits and 40 individuals with low schizotypal traits for this study. Currently, we plan to recruit approximately 75% of the total sample from the UCI Human Subjects Lab Pool and approximately 25% of the total sample from the general UCI undergraduate population as we want to obtain a demographically representative sample. Following the recruitment methods of existing research (e.g., Crego & Widiger, 2017; Edmundson et al., 2011), we will recruit a group of participants with elevated schizotypal traits using the Coolidge Axis II-Schizotypal Personality Disorder Scale (Coolidge & Merwin, 1992). High-scorers will be identified as individuals who endorse at least 50% of the items on the scale (i.e., a rating of 3 = “More True” or 4 = “Strongly True” on at least 9 out of 18 items). We will also recruit a group of participants with low elevated schizotypal traits (i.e., a rating of 1 = “Strongly False” on at least 9 out of 18 items and no ratings above 2 = “More False”).
Sample Size Justification:
Using G*Power 3.1 (Faul et al., 2009), an *a priori* power analysis was run to assess how many participants are needed in the high and low-scoring groups to detect medium to large effects (d = 0.60, alpha = 0.05, power = .80). Subclinical population studies tend to detect medium to large effects (e.g., Moore et al., 2019). Thus, we determined that we will need to recruit at least 40 high-scoring participants and at least 40 low-scoring participants, to achieve appropriate power while accounting for approximately 10% drop-out in each group (*N* = 72 following drop-out with *n* = 36 minimum needed per independent group).

Methods:
Part I: Participants will be recruited using the UC Irvine’s Human Subject Lab Pool (SONA) and through on-campus and online advertisements for the Non-SONA recruitment channel of the study. Participants will sign up to take an online survey if they meet the qualifications listed on the site. After signing up, participants will have access to a Qualtrics survey during which they will indicate interest in participating in further studies. Those who indicate interest, may be contacted to participate in Part II. The online survey is also composed of multiple questionnaires including the Five Factor Schizotypal Inventory (FFSI), the Coolidge Axis II- Schizotypal Personality Disorder Subscale (CATI-STPD), the Chapman Infrequency Scale, as well as questions for demographic information (race and ethnicity, sex, age, ability to read and speak English, and country of birth). Invalid and inattentive responses from the Part I survey will be filtered out using the Chapman Infrequency Scale, a 13 item measure designed to indicate inattentiveness and careless answers. Any participant who incorrectly responds to 3 or more items on the scale will be disqualified from participation in Part II.

Part II: Along with confirmation of interest to participate in Part II, top-scoring undergraduate participants in Part I’s CATI-STPD scale will be eligible for recruitment to proceed with Part II of the study. The participant will meet with the researcher via a 30-minute Zoom training session during which the participant will be guided through how to download and use the TigerAware smartphone app (funded by [Redacted], BEAN Lab PI). During this session, a standardized training video will be presented, and participants will have the opportunity to watch and ask the researcher clarification questions regarding the video if needed. After the training video, participants will be required to pilot the Enrollment Day Survey, a sample survey that will introduce them to the various questions and question formatting (e.g., continuous sliders, multiple-choice questions). Then, participants will be presented with the option of an objective feedback sheet that summarizes their week’s answers—this excludes any advice or suggestions about the report. These feedback sheets are included to ensure participant retention and response accuracy. The participants will also have access to the graduate student researcher's email and phone number for any further questions. Each participant will receive 0.5 SONA credits for their psychology coursework following the completion of Part II if they are in the SONA version of the study.

Part III: The week of surveys will begin the day following the completion of Part II. Surveys will be distributed three times a day for a total of seven days on a semi-random schedule within a
four hour interval (e.g., a trigger between 10 am-2 pm, 2 pm-6 pm, and 6 pm-10 pm). Participants will report their usual daily waking hours to the researcher after signing up for the study to accommodate the survey schedule to their own. Each participant will receive an appropriate survey sign-up link depending on the given information (i.e., survey links for 9 am-9 pm, 10 am-10 pm, etc.). After the initial signal, each survey will remain open for 30 minutes, followed by one reminder notification 15 minutes after the initial signal if the survey remains unanswered. These surveys will evaluate both positive and negative emotion experiences, emotion intensity, emotion regulation strategies, and emotion goals observed in daily life. Specific survey questions related to this proposed study are detailed in the Appendix.

This project will focus specifically on the negative emotions in the survey, measuring 20 negative ER strategies in daily life and the effectiveness of ER strategies with specific emotion types. These are novel studies that haven’t been assessed using ESM in this group. Each survey will start with questions about negative emotion experiences. The research will use a randomized program for the order of survey questions to minimize priming effects. Participants will receive up to 3.5 SONA credits for their psychology coursework depending on the percentage of surveys completed throughout the whole week. Participants will also be compensated monetarily based on how they were recruited (through SONA or through Non-SONA) and based on the percentage of surveys they completed; see compensation schedules below for further details. Upon request in Part II, participants will also receive an individualized feedback sheet of their responses following the completion of the study. The undergraduate researchers will complete Parts I-III under the direct supervision of a graduate student mentor, Madeline Snyder.

SONA Participant compensation schedule:
Participants will receive 0.5 SONA credits for every 3 surveys they complete within the 7-day period of Part II. Monetary compensation will be given in person at the BEAN Lab (Social Ecology II, 3364). The scale for compensation is as follows:
The scale for monetary compensation for SONA participants is as follows:
- Completed over 85% of surveys (i.e., at least 18 surveys): $20
- Completed over 75% of surveys (i.e., at least 16 surveys): $15
- Completed over 65% of surveys (i.e., at least 14 surveys): $10
- Completed less than 65% of surveys: N/A monetary compensation

Non-SONA Participant compensation schedule:
- Completed Part I, Part II & at least 19 surveys: $50 (this is within minimum wage laws)
- Completed Part I, Part II & at least 18 surveys: $43
- Completed Part I, Part II & at least 17 surveys $41
  - Compensation decreases by $2 for each survey missed
  - If a participant completes less than 7 surveys, they will receive $15 dollars for their time

Analytical plan:
Aim/Hypothesis 1: ER Strategy Use Frequency
For total ER strategy use, we will add the total number of surveys where at least one ER strategy was used in response to a negative emotion and divide this by the total number of surveys taken over the 7-day period where the experience of a negative emotion was endorsed for each participant. Then, we will use an independent groups t-test (one-tail, p < .05 significance cut-off) to compare the proportion of use of any ER strategy in the high schizotypal traits group in comparison to the low schizotypal traits group.

For each individual ER strategy, we will calculate the total number of reported uses divided by the total number of surveys taken over the 7-day survey period where the experience of a negative emotion was endorsed for each participant. Then, we will use an independent groups t-test (one-tail, p < .05 significance cut-off) to compare the proportion of use of a specific ER strategy in the high schizotypal traits group in comparison to the low schizotypal traits group.

For both total ER strategy use frequency and for specific avoidance-related ER strategy use frequency (i.e., expressive suppression, emotional suppression, denial, substance abuse), we expect to reject the null hypothesis that the high and low schizotypal traits groups report equivalent frequencies of ER strategy use. Instead, we expect that the high schizotypal group will report significantly more frequent use of total ER strategy use and the use of avoidance-related ER strategy use in response to negative emotion experience across the 7-day survey period.

**Aim/Hypothesis 2: Effectiveness of Specific ER Strategies**

For each ER strategy, we will calculate the total number of effective uses to change or maintain emotion intensity divided by total uses meant to change or maintain emotion intensity over the 7-day survey period for each participant. Then, we will use an independent groups t-test (one-tail, p < .05 significance cut-off) to compare the effectiveness of each ER strategy in changing or maintaining emotion intensity in the high schizotypal traits group in comparison to the low schizotypal traits group. These between-groups comparisons will be used to test our directional hypothesis that the high schizotypal traits group will rate each of the individual ER strategies as less effective at changing or maintaining emotion intensity than the low schizotypal traits group.

For each ER strategy, we will calculate the total number of effective uses to change emotion type divided by total uses meant to change emotion type over the 7-day survey period for each participant. Then, we will use an independent groups t-test (one-tail, p < .05 significance cut-off) to compare the effectiveness of each ER strategy in changing emotion type in the high schizotypal traits group in comparison to the low schizotypal traits group. These between-groups comparisons will be used to test our directional hypothesis that the high schizotypal traits group will rate the individual ER strategies as less effective at changing emotion type than the low schizotypal traits group.

**Aim/Hypothesis 3: Frequency of Emotion Regulation Goals**
For each participant, the frequency of choosing each specific emotion regulation goal will be divided by the total number of surveys completed over the 7-day period. Then, we will use an independent groups t-test (one-tail, \( p < .05 \) significance cut-off) to compare the frequency of the “I did not regulate my emotions” emotion regulation goal in the high schizotypal traits group in comparison to the low schizotypal traits group. We will also conduct exploratory statistical analyses (i.e., two-tail independent groups t-tests, \( p < .05 \) significance cut-off) for the other emotion regulation goal-types.

**Itemized budget:**

<table>
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<tr>
<th>Description</th>
<th>Cost</th>
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<tr>
<td>SONA Participant Compensation</td>
<td>$20 x 60 SONA participants = $1,200</td>
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<tr>
<td>Non-SONA Participant Compensation</td>
<td>$50 x 20 Non-SONA participants = $1,000</td>
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<td>Poster materials</td>
<td>$100</td>
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<td><strong>Total funds requested</strong></td>
<td><strong>$2,300</strong></td>
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**Budget justification:**

We have requested the maximum funds to compensate 30 high scorers from SONA, 10 high scorers from Non-SONA, 30 low scorers from SONA, and 10 low scorers from Non-SONA for their participation in our study. However, it is likely that some participants may not complete enough surveys to earn the full $20 or $55. We have a justification for this request: ideally, if funding was available, we would recruit 50% of our sample from SONA and 50% of our sample from Non-SONA to ensure the most representative sample demographically. Thus, any additional funds will be used to recruit a greater percentage of Non-SONA participants in order to achieve a more diverse, generalizable sample to increase the external validity of our findings and improve the quality of our study overall.

**Training Plan by Quarter:**

**Spring Quarter, 2022**

- Joined the BEAN Lab to be mentored by clinical psychology doctoral student, Madeline Snyder, and developed an undergraduate group research project idea
- UROP Proposal Submission
- Daily survey piloting
- Training on consenting participants to participate in the study
- Training on conducting Part II & Part III of the study
- Training on recognizing concerning behaviors in participants’ responses
- Training on conducting recruitment analyses for the study in R programming
- Training on contacting eligible participants for the study
- Training on participant compensation (SONA credit & monetary compensation)

**Summer, 2022**

- Consenting participants, conducting Part II, conducting Part III
Try to recruit at least 10 high-scoring participants from SONA
Try to recruit at least 10 high-scoring participants from Non-SONA following eMod approval

- Creating personalized feedback sheets for participants every week
- Conducting recruitment analyses and contacting eligible participants every week

Fall Quarter, 2022
- Consenting participants, conducting Part II, conducting Part III every week
  - Try to recruit at least 20 high-scoring participants from SONA
  - Try to recruit at least 15 low-scorers from SONA
- Creating personalized feedback sheets for participants every week
- Conducting recruitment analyses and contacting eligible participants every week

Winter Quarter, 2023
- Consenting participants, conducting Part II, conducting Part III every week
  - Try to recruit 15 low-scoring participants from SONA
  - Try to recruit 10 low-scoring participants from Non-SONA
- Creating personalized feedback sheets for participants every week
- Conducting recruitment analyses and contacting eligible participants every week

Spring Quarter, 2023
- Statistical analyses training and R programming training (e.g., figures for poster) with graduate mentor
- Conduct statistical analyses for project
- Create poster for UROP Spring Conference 2023
- Present study at UROP Spring Conference 2023

IRB status- eMod pending to compensate participants with both money and SONA credit, approved to compensate participants with SONA credit (IRB #20205701)
References


Appendix
Part III: Abbreviated Smartphone Survey with Relevant Questions for Proposed Study

Since the last survey, how many distinct NEGATIVE emotion experiences have you had?

- □ 0
- □ 1
- □ 2
- □ 3
- □ 4
- □ 5
- □ 6+

*Display logic: if the participant endorses 0 distinct negative emotion experiences since the last survey.*

You indicated that you have had 0 NEGATIVE emotion experiences since the last survey. Therefore, please think of the LEAST PLEASANT emotion experience that you have had since the last survey for all of the following questions about your most negative emotion experience.

On a scale from 1 to 7, how UNPLEASANT would you rate your LEAST PLEASANT emotion experience overall?

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1: Not at all
2: Slightly
3: Somewhat
4: Average
5: Moderately
6: Very
7: Extremely

*Display logic: if the participant endorses 1 or more distinct negative emotion experiences since the last survey.*

Think of your MOST UNPLEASANT negative emotion experience since the last survey. On a scale from 1 to 7, how UNPLEASANT would you rate your MOST UNPLEASANT emotion experience overall?

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Did you use this strategy to change the NEGATIVE EMOTION you were feeling AND/OR to change or maintain the INTENSITY of that NEGATIVE EMOTION?

I accepted the situation and/or my emotions
- [ ] No.
- [ ] Yes, but it was NOT EFFECTIVE in changing the emotion type.
- [ ] Yes, and it was EFFECTIVE in changing the emotion type.
- [ ] Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
- [ ] Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I found an activity to keep myself busy and distracted
- [ ] No.
- [ ] Yes, but it was NOT EFFECTIVE in changing the emotion type.
- [ ] Yes, and it was EFFECTIVE in changing the emotion type.
- [ ] Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
- [ ] Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I thought over and over again about the situation and my feelings
- [ ] No.
- [ ] Yes, but it was NOT EFFECTIVE in changing the emotion type.
- [ ] Yes, and it was EFFECTIVE in changing the emotion type.
- [ ] Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
- [ ] Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I made a plan to make the situation better
- [ ] No.
- [ ] Yes, but it was NOT EFFECTIVE in changing the emotion type.
- [ ] Yes, and it was EFFECTIVE in changing the emotion type.
- [ ] Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
- [ ] Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I reminded myself that things could be worse
I found a friend or family member to talk to
- No.
- Yes, but it was NOT EFFECTIVE in changing the emotion type.
- Yes, and it was EFFECTIVE in changing the emotion type.
- Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
- Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I thought about how I could become stronger or learn from this situation
- No.
- Yes, but it was NOT EFFECTIVE in changing the emotion type.
- Yes, and it was EFFECTIVE in changing the emotion type.
- Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
- Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I thought about all the different things in my life that this situation would impact
- No.
- Yes, but it was NOT EFFECTIVE in changing the emotion type.
- Yes, and it was EFFECTIVE in changing the emotion type.
- Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
- Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I thought about how this situation was my fault
- No.
- Yes, but it was NOT EFFECTIVE in changing the emotion type.
- Yes, and it was EFFECTIVE in changing the emotion type.
- Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
- Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I thought about all the other things that have happened to me in addition to this
- No.
- Yes, but it was NOT EFFECTIVE in changing the emotion type.
- Yes, and it was EFFECTIVE in changing the emotion type.
- Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
- Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I thought about how this situation was someone else's fault
- No.
- Yes, but it was NOT EFFECTIVE in changing the emotion type.
- Yes, and it was EFFECTIVE in changing the emotion type.
Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.

Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I controlled my emotions by not showing them

No.

Yes, but it was NOT EFFECTIVE in changing the emotion type.

Yes, and it was EFFECTIVE in changing the emotion type.

Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.

Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I thought of something pleasant instead of what had happened

No.

Yes, but it was NOT EFFECTIVE in changing the emotion type.

Yes, and it was EFFECTIVE in changing the emotion type.

Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.

Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I thought about the situation in a different way

No.

Yes, but it was NOT EFFECTIVE in changing the emotion type.

Yes, and it was EFFECTIVE in changing the emotion type.

Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.

Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I went to sleep

No.

Yes, but it was NOT EFFECTIVE in changing the emotion type.

Yes, and it was EFFECTIVE in changing the emotion type.

Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.

Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I ignored my feelings

No.

Yes, but it was NOT EFFECTIVE in changing the emotion type.

Yes, and it was EFFECTIVE in changing the emotion type.

Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.

Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I smoked a cigarette/drank alcohol/got high

No.

Yes, but it was NOT EFFECTIVE in changing the emotion type.

Yes, and it was EFFECTIVE in changing the emotion type.

Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.

Yes, and it was EFFECTIVE in changing or maintaining the emotion.
I just acted like the situation had never happened at all
☐ No.
☐ Yes, but it was NOT EFFECTIVE in changing the emotion type.
☐ Yes, and it was EFFECTIVE in changing the emotion type.
☐ Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
☐ Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I exercised
☐ No.
☐ Yes, but it was NOT EFFECTIVE in changing the emotion type.
☐ Yes, and it was EFFECTIVE in changing the emotion type.
☐ Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
☐ Yes, and it was EFFECTIVE in changing or maintaining the emotion.

I hurt (e.g., pinched, cut, burned, hit) myself
☐ No.
☐ Yes, but it was NOT EFFECTIVE in changing the emotion type.
☐ Yes, and it was EFFECTIVE in changing the emotion type.
☐ Yes, but it was NOT EFFECTIVE in changing or maintaining the intensity of the emotion.
☐ Yes, and it was EFFECTIVE in changing or maintaining the emotion.

What was your MAIN REASON OR GOAL for regulating your MOST UNPLEASANT negative emotion experience?
☐ To change mood
☐ To keep up appearances
☐ To make others feel better/happy
☐ To get work done
☐ I did not have a reason
☐ I did not regulate my emotions
☐ Other option: __________

How ATTENTIVE were you to this survey and your survey answers?

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