

# BEHAVIOR ACTIVATION

Name:

Date:

## Mood: Check-In

How are you feeling right now?

## Activity Planning

- What activity will you do?
- When will you do it?
- How long will it take?
- Is it something you've done before or something new?

## Type of Activity

- Mastery (e.g., paying a bill, organizing)
- Pleasure (e.g., walking outside, watching a show)
- Social (e.g., calling a friend)
- Self-care (e.g., showering, eating a meal)

## Barriers & Solutions

- What might get in the way?
- What's one way I can prepare for that?

## Mood: Check-In (After)

- How do you feel after doing the activity?
- Reflect on what worked or what didn't
- Small wins I noticed