Compulsive Behavior: Assessment and Intervention Worksheet

EMDR Deconstructed ~ Linda A. Curran, BCPC, LPC, CAADC, CCDPD

Part 1: Understanding the Behavior

A compulsion is not a character flaw. It is a solution ~ a necessary one, a costly one ~ to a problem you could not otherwise solve. This worksheet helps you and your clinician identify the driver behind the behavior so you can choose the right intervention.

Target behavior: _____

When did it start? _____

What was happening in your life at that time?

_____

Part 2: Identify the Driver

The driver determines the intervention. Circle the one that fits best:

Driver	Description	Signs
Emotional payoff	The behavior gives you a specific positive feeling (power, excitement, relief, numbness)	You feel “high” or rewarded during/after the behavior
Trigger-urge pathway	Specific situations, emotions, or cues automatically trigger the urge	You can name the triggers; the urge feels automatic
The craving itself	The physical/emotional craving dominates; it feels like a need in the body	Body sensations drive the behavior; thinking about it intensifies it

Your primary driver: _____

Part 3: Trigger Mapping

List your top 5 triggers (situations, emotions, people, times of day, physical states):

#	Trigger	Intensity (0-10)	What I usually do
1			
2			
3			
4			
5			

Part 4: The Feeling-State Connection

If your driver is **emotional payoff**, answer these:

What positive feeling does the behavior give you? (e.g., power, control, excitement, calm, numbness, connection)

Rate the intensity of that feeling during the behavior (0-10): _____

Where do you feel it in your body?

_____

What image comes to mind when you think of the behavior at its most rewarding?

Part 5: Readiness Assessment

Before addressing compulsive behaviors with ABLS, check these:

Readiness Factor	Yes	No	Notes
I can identify when I’m triggered			
I have at least one grounding technique that works			
I can tolerate moderate distress without acting on it (even briefly)			
I have a Comfortable Place or resource I can access			
I am not currently in crisis			

If you checked “No” on 2 or more: stabilization and resourcing come first. That is not a delay ~ it is building the foundation.

Part 6: Intervention Matching

Based on your driver, your clinician may use:

Your Driver	Protocol	What It Does
Emotional payoff	FSAP	Processes the link between the positive feeling and the behavior
Trigger-urge pathway	DeTUR	Desensitizes triggers so the urge loses its charge
The craving itself	CravEx	Processes the craving’s physical and emotional components directly

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Part 7: Alternative Behavior Planning

For each trigger, identify one alternative behavior you could rehearse:

Trigger	Alternative behavior	Resource needed

Behavioral rehearsal with ABLS: Your clinician will guide you through imaginally practicing the alternative behavior while pairing it with bilateral stimulation. The goal: your body believes you can do it before you have to do it in the world.

Part 8: Between-Session Tracking

Use this grid between sessions. Track urges, what triggered them, and what you did:

Date	Trigger	Urge (0-10)	What I did	Outcome

Bring this to your next session. The data helps your clinician adjust the intervention.

Grounding Reminder

If an urge feels overwhelming right now:

1. Feet on the floor. Feel the pressure.
2. Name 5 things you can see.
3. Butterfly hug: arms crossed, alternating slow taps, 10 rounds.
4. Ask: “What does this urge need me to know?”

The urge is information. It is not a command.

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