

State Measure of Experiential Avoidance		Very slightly or not at all	A little	Moderately	Quite a bit	Extremely
1.	How upset and distressed over anxiety were you?	1	2	3	4	5
2.	How much effort did you put into making anxiety-related feelings or thoughts go away?	1	2	3	4	5
3.	How much did you struggle to try and control your anxiety-related feelings or thoughts?	1	2	3	4	5
4.	To what degree did you give up saying or doing what you like (or mattered to you) in order to control and manage your anxiety?	1	2	3	4	5

State Measure of Experiential Avoidance – Daily diary version		Not at all			Moderately			Very much
1.	How upset and bothered were you about anxiety-related feelings or thoughts?	1	2	3	4	5	6	7
2.	How much did you try to hide and/or conceal your anxiety from others?	1	2	3	4	5	6	7
3.	How much did you try to control your anxiety-related feelings or thoughts?	1	2	3	4	5	6	7
4.	To what degree did you give up saying or doing what you like (or mattered to you) in order to control and manage your anxiety?	1	2	3	4	5	6	7

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