

EMOTION TAXONOMY FOR DECISION-MAKERS

A practical reference covering 27 discrete emotional states: their physiological profiles, decision-distortion risks, and evidence-based intervention protocols.

About This Reference

This taxonomy is grounded in Cowen & Keltner's (2017) empirical mapping of 27 distinct emotional categories and subsequent work in affective neuroscience and cognitive behavioural research. It is organised for professional use — specifically for people who make consequential decisions inside complex organisations where emotional interference has measurable operational cost.

Each emotion is treated as a discrete domain requiring its own attention. The taxonomy explicitly rejects the premise of a general Emotional Intelligence (EQ) factor. Competency in managing one emotional state does not predict competency in managing others. Use this reference to identify which specific states are active in a given context — and apply the corresponding intervention before a decision is made.

How to Use the High-Risk Flags

Eight emotional states are designated **HIGH RISK** for professional decision-making. These are the states most reliably shown to distort judgement, compress deliberation time, introduce attribution errors, or motivate decisions that serve the emotional state rather than the situation. When one of these eight states is active, the primary protocol is: *do not make irreversible decisions until the intervention has been applied*.

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| ● HIGH RISK | Intervene before deciding. Do not make irreversible decisions while this state is active. |
| ● MED RISK | Apply awareness. Note which direction the state is pulling your framing. |
| ● LOW RISK | Monitor only. These states generally support or are neutral to clear decision-making. |

Source: Taxonomy structure derived from Cowen, A.S. & Keltner, D. (2017). Self-report captures 27 distinct categories of emotion bridged by continuous gradients. PNAS. Intervention protocols draw on CBT, ACT, and applied decision-science literature. Compiled for A Fulcrum — fulcrum.blog

#	Emotion	Cluster	Risk	Physiological Profile	Decision Distortion Under Pressure	Evidence-Based Intervention
1	Anxiety	Threat-Anticipatory	● HIGH	Elevated cortisol; increased heart rate; muscle tension; narrowed attentional field	Catastrophising; premature closure; avoidance of ambiguous information; over-weighting of worst-case scenarios	Structured worry containment (scheduled 10-min window); cognitive defusion via written externalisation; deliberate attentional broadening before decision
2	Fear	Threat-Reactive	● HIGH	Acute amygdala activation; adrenaline surge; tunnel-vision effect; freeze/flight impulse	Reactive decision-making; deferral of responsibility; over-reliance on authority; loss of systemic perspective	Physiological reset (slow exhale, 5-5-5 breath cycle) before engagement; named exposure to the feared scenario in writing; 'What is actually certain here?' grounding question
3	Anger	Boundary-Violation	● HIGH	Testosterone spike; cardiovascular arousal; jaw/shoulder tension; shortened time horizon	Attribution of malicious intent; retributive framing; compressed risk tolerance; coalition-building against target	Physical discharge before decision (brief walk, isometric tension release); 24-hour rule for consequential responses; reframe from 'who did this' to 'what does the situation require'
4	Disgust	Contamination-Avoidance	● HIGH	Nausea response; elevated reactivity to moral violations; rejection impulse	Moral overweighing in operational decisions; binary categorisation (pure/impure); dismissal of evidence from 'tainted' sources	Deliberate source-separation: 'Is this operationally wrong or does it merely feel wrong?' Written distinction between ethical objection and personal aesthetic aversion
5	Envy	Social-Comparison	● HIGH	Lowered self-assessed competence; heightened vigilance toward envied party; hostile attribution bias	Sabotage via omission; withholding information; framing decisions to disadvantage the envied party without explicit acknowledgement	Explicit naming of the envied attribute; separation of 'what I want' from 'what the decision requires'; accountability partner for decisions involving the envied party
6	Excitement	Reward-Anticipatory	● HIGH	Dopamine activation; elevated risk tolerance; compressed deliberation time; optimism bias amplification	Overcommitment; underestimation of costs and obstacles; anchoring on best-case scenario; impatience with due diligence	Pre-mortem protocol ('If this fails in 12 months, what went wrong?'); mandatory 48-hour cooling period for irreversible decisions; written devil's advocate before commitment
7	Shame	Self-Evaluative	● HIGH	Cortisol elevation; social withdrawal impulse; self-monitoring overload; rumination loop	Information concealment; deflection of accountability; over-correction and appeasement; decision paralysis to avoid further exposure	Distinguish shame (global self-indictment) from guilt (specific behavioural regret); write a factual account of events before engaging; separate 'I did something wrong' from 'I am wrong'
8	Craving / Urge	Appetitive	● HIGH	Nucleus accumbens activation; attentional narrowing toward reward cue; impulse-control suppression	Rationalisation of preferred outcome; selective evidence use; premature termination of analysis once desired conclusion is reachable	Urge-surfing (observe without acting for a minimum of 10 minutes); articulate the craving explicitly before the decision; separation of 'what I want to be true' from 'what the data shows'
9	Sadness	Loss-Response	● MED	Reduced dopamine; lowered energy; slowed processing; increased self-focused attention	Pessimistic framing; underestimation of resources and options; withdrawal from collaborative problem-solving	Behavioural activation over rumination; explicitly note what remains intact and functional; postpone strategic decisions during acute phase where operationally possible
10	Awkwardness	Social-Discomfort	● MED	Self-conscious attention spike; inhibited expression; heightened awareness of social evaluation	Premature agreement to reduce discomfort; avoidance of necessary confrontation; placation over accuracy	Name the awkwardness internally before speaking; prepare key points in writing before difficult conversations; accept that short-term discomfort does not indicate a wrong decision
11	Confusion	Cognitive-Overload	● MED	Prefrontal cortex load; working memory impairment; tendency toward cognitive shortcuts	Premature certainty; anchoring on first available explanation; susceptibility to confident-sounding bad advice	Slow down: 'I do not yet understand this sufficiently to decide.' Decompose the problem into smaller, answerable questions; tolerate not-knowing as a temporary and productive state

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12	Nostalgia	Temporal-Contrast	● MED	Warm autobiographical memory activation; elevated positive affect for past; implicit comparison to present	Status quo bias; resistance to change framed as loss; idealisation of prior approaches; 'we've always done it this way' reasoning	Distinguish between the past working well and the past being the right approach now; explicit future-state analysis before nostalgic framing is allowed to close the decision
13	Boredom	Understimulation	● MED	Reduced arousal; attentional disengagement; stimulus-seeking impulse	Unnecessary complexity-creation; change for change's sake; low-stakes decisions made with disproportionate energy; risky options preferred due to novelty	Distinguish boredom from a genuine signal that the work is insufficient; separate 'I am bored' from 'this decision needs to change'; channel stimulus-seeking into review rather than redesign
14	Sympathy	Other-Oriented	● MED	Mild prosocial arousal; reduced critical distance from the sympathised party; in-group expansion	Leniency bias; decisions that favour the sympathised party at systemic cost; postponement of necessary difficult actions	Explicit separation: 'What does this person need?' from 'What does the situation require?'; third-party perspective-taking ('What would a fair observer recommend?')
15	Guilt	Self-Evaluative	● MED	Moderate cortisol; reparative impulse; focused self-critical attention	Over-compensation; decisions structured to make amends rather than solve the problem; susceptibility to manipulation by parties who have identified the guilt	Distinguish reparative action (addressing specific harm done) from self-punishment (decisions structured around expiation); ensure corrective actions serve the situation, not just the internal discomfort
16	Contempt	Social-Hierarchical	● MED	Mild SNS activation; elevated sense of superiority; reduced empathic engagement	Dismissal of valid input from contemned source; communication failures; team disengagement; missed information from underestimated parties	Hard rule: evaluate the argument, not the arguer; track decisions where contempt for the source may have influenced the outcome; solicit input specifically from parties you least expect to be useful
17	Awe	Vastness-Response	● MED	Parasympathetic activation; self-diminishment; expanded sense of time	Deference to perceived authority or scale; decisions that prioritise the grand over the particular; difficulty with granular execution after exposure to large-scale framing	Ground awe in specific, operational questions; translate inspiration into measurable next actions before the affective state dissipates
18	Empathic Pain	Other-Oriented	● MED	Mirror neuron engagement; shared physiological distress response; self-other boundary erosion	Vicarious distress leading to avoidance; decisions structured to prevent pain rather than achieve outcomes; burnout in high-exposure roles	Distinguish empathy (understanding another's experience) from emotional merger (experiencing it as your own); structured debrief after high-distress interactions; maintain a consistent self-anchor
19	Joy	Reward-Response	● LOW	Dopamine and serotonin elevation; broadened attentional scope; increased cognitive flexibility	Mildly elevated optimism bias; social expansiveness that may occasionally overshare	Generally supports good decision-making; note if joy is attached to a specific outcome that may bias analysis; use broadened thinking productively for generative problem-solving
20	Admiration	Social-Evaluative	● LOW	Elevated positive affect toward the admired party; motivational arousal to emulate	Halo effect applied to admired party's unrelated claims or decisions; over-deference	Separate admiration for one quality from generalised trust; evaluate claims from admired parties by the same standard as all others
21	Satisfaction	Completion-Response	● LOW	Mild endorphin release; reduced arousal; task-closure signal	Premature closure; 'good enough' threshold reached before optimal solution is found	Use satisfaction as a signal to review, not to stop: 'What would the next 10% of improvement look like?' before signing off
22	Calmness	Regulatory-State	● LOW	Parasympathetic dominance; lowered cortisol; optimal prefrontal function	Occasionally: underestimation of genuine urgency; passivity when escalation is warranted	Calmness is the target state for consequential decisions; verify that calm is not masking avoidance of a situation that warrants active attention

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23	Interest	Exploratory	● LOW	Mild dopamine activation; attentional orientation; reduced cognitive load	Scope creep in analytical tasks; difficulty prioritising when multiple things are equally interesting	Use interest as a signal for where to invest attention; guard against interest in the interesting over attention to the important
24	Aesthetic Appreciation	Perceptual-Evaluative	● LOW	Default mode network activation; pattern-recognition engagement; positive affect	Preference for elegant solutions over effective ones; decisions that prioritise coherence over pragmatic fit	Distinguish 'this is beautiful' from 'this works'; use aesthetic instinct as a signal to investigate, not as a decision criterion
25	Amusement	Incongruity-Response	● LOW	Mild positive arousal; social bonding signal; cognitive flexibility increase	Difficulty maintaining seriousness in high-stakes contexts; occasional minimisation of genuine concern via humour	Use amusement as a social lubricant judiciously; monitor for humour functioning as avoidance of a necessary difficult conversation
26	Triumph	Achievement	● LOW	Elevated testosterone and dopamine; surge in self-assessed competence; heightened approach motivation	Overconfidence in subsequent unrelated tasks; difficulty accurately assessing the contribution of luck versus skill in the win	Conduct a brief luck/skill audit after significant wins before applying confidence to the next challenge; resist generalising domain-specific success
27	Entrancement / Absorption	Attentional	● LOW	Flow-state markers; reduced self-monitoring; time-perception distortion	Difficulty disengaging when time or context demands it; resistance to interruption at operationally inconvenient moments	Use scheduled time-blocks to protect deep-work states; build in transition protocols so absorption does not prevent necessary responsiveness

QUICK-REFERENCE PROTOCOLS — 8 HIGH-RISK STATES

When one of these eight states is active, apply the three-step protocol before making any irreversible decision.

1. Anxiety	Name it precisely. Write: 'I am anxious about [specific outcome].' Run a 10-minute contained worry window. Then ask: What is actually certain here? Broaden attention deliberately before re-engaging with the decision.
2. Fear	Physiological reset first: 5-count inhale, 5-count hold, 5-count exhale — repeat twice. Write the feared scenario explicitly. Ask: What is the actual probability? What would I do if it happened? Proceed only after answering both in writing.
3. Anger	Physical discharge before any response: brief walk or isometric tension-release. Apply the 24-hour rule for any response that cannot be recalled. Reframe from attribution (who did this) to requirement (what does the situation need).
4. Disgust	Apply the operational/moral distinction test in writing: 'Is this actually wrong, or does it merely feel wrong to me?' Separate the ethical objection from the aesthetic aversion before proceeding.
5. Envy	Name the envied attribute explicitly — do not permit it to remain implicit. Separate 'what I want' from 'what the decision requires.' For decisions involving the envied party, apply mandatory peer review.
6. Excitement	Run a pre-mortem: 'If this fails completely in 12 months, what went wrong?' Enforce a 48-hour delay on irreversible commitments. Require a written devil's advocate before any commitment is made.
7. Shame	Distinguish shame (I am bad) from guilt (I did something bad). Write a factual account of events before engaging with anyone. Separate corrective action from self-punishment — ensure decisions serve the situation.
8. Craving / Urge	Urge-surf: observe the impulse without acting for a minimum of 10 minutes. Write the craving explicitly: 'I want [specific outcome] to be true.' Separate desired conclusion from available evidence before proceeding.

This reference is produced by A Fulcrum — a platform for decision-making, Stoic philosophy, and systems thinking. fulcrum.blog | For the companion article and framework, visit fulcrum.blog.