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Cbt reframing thoughts

Even if you're relatively unfamiliar with psychology, chances are you've heard of cognitive-behavioral therapy, commonly known as CBT. It's an extremely common type of talk therapy practiced around the world. If you've ever interacted with a mental health therapist, a counselor, or a psychiatry clinician in a professional setting, it's likely you've participated in CBT. If you've ever heard friends or loved ones talk about how a mental health professional helped them identify unhelpful thoughts and patterns and behavior and alter them to more effectively work towards their goals, you've heard about the impacts of CBT. CBT is one of the most frequently used tools in the psychologist's toolbox. Though it's based on simple principles, it can have wildly positive outcomes when put into practice. In this article, we'll explore what CBT is, how it works, and how you can apply its principles to improve your own life or the lives of your clients. Before you read on, we thought you might like to download our 3 Positive CBT Exercises for free. These science-based exercises will provide you with a comprehensive insight into Positive CBT and will give you the tools to apply it in your therapy or coaching. You can download the free PDF here. What is CBT? This simple idea is that our unique patterns of thinking, feeling, and behaving are significant factors in our experiences, both good and bad. Since these patterns have such a significant impact on our experiences, it follows that altering these patterns can change our experiences" (Martin, 2016). Cognitive-behavioral therapy aims to change our thought patterns, our conscious and unconscious beliefs, our attitudes, and, ultimately, our behavior, in order to help us face difficulties and achieve our goals. Psychiatrist Aaron Beck was the first to practice cognitive behavioral therapy. Like most mental health professionals at the time, Beck was a psychoanalysis practitioner. While practicing psychoanalysis, Beck noticed the prevalence of internal dialogue in his clients and realized how strong the link between thoughts and feelings can be. He altered the therapy he practiced in order to help his clients identify, understand, and deal with the automatic, emotion-filled thoughts that regularly arose in his clients. Beck found that a combination of cognitive therapy and behavioral techniques produced the best results for his clients. In describing and honing this new therapy, Beck laid the foundations of the most popular and influential form of therapy of the last 50 years. This form of therapy is not designed for lifelong participation and aims to help clients meet their goals in the near future. Most CBT treatment regimens last from five to ten months, with clients participating in one 50- to 60-minute session per week. CBT is a hands-on approach that requires both the therapist and the client to be invested in the process and willing to actively participate. The therapist and client work together as a team to identify the problems the client is facing, come up with strategies for addressing them, and creating positive solutions (Martin, 2016). Cognitive Distortions Many of the most popular and effective cognitive-behavioral therapy techniques are applied to what psychologists call "cognitive distortions," inaccurate thoughts that reinforce negative thought patterns or emotions (Groh, 2016). There are 15 main cognitive distortions that can plague even the most balanced thinkers. 1. Filtering Filtering refers to the way a person can ignore all of the positive and good things in life to focus solely on the negative. It's the trap of dwelling on a single negative aspect of a situation, even when surrounded by an abundance of good things. 2. Polarized thinking / Black-and-white thinking This cognitive distortion is all-or-nothing thinking, with no room for complexity or nuance—everything's either black or white, never shades of gray. If you don't perform perfectly in some area, then you may see yourself as a total failure instead of simply recognizing that you may be unskilled in one area. 3. Overgeneralization Overgeneralization is taking a single incident or point in time and using it as the sole piece of evidence for a broad conclusion. For example, someone who overgeneralizes could bomb an important job interview and instead of brushing it off as one bad experience and trying again, they conclude that they are terrible at interviewing and will never get a job offer. 4. Jumping to conclusions Similar to overgeneralization, this distortion involves faulty reasoning in how one makes conclusions. Unlike overgeneralizing one incident, jumping to conclusions refers to the tendency to be sure of something without any evidence at all. For example, we might be convinced that someone dislikes us without having any real evidence, or we might believe that our fears will come true before we have a chance to really find out. 5. Catastrophizing / Magnifying or Minimizing This distortion involves expecting that the worst will happen or has happened, based on an incident that is nowhere near as catastrophic as it is made out to be. For example, you may make a small mistake at work and be convinced that it will ruin the project you are working on, that your boss will be furious, and that you'll lose your job. Alternatively, one might minimize the importance of positive things, such as an accomplishment at work or a desirable personal characteristic. 6. Personalization This is a distortion where an individual believes that everything they do has an impact on external events or other people, no matter how irrational that may be. A person with this distortion will feel that he or she has an exaggerated role in the bad things that happen around them. For instance, a person may believe that arriving a few minutes late to a meeting led to it being derailed and that everything would have been fine if they were on time. 7. Control fallacies This distortion involves feeling like everything that happens to you is either a result of purely external forces or entirely due to your own actions. Sometimes what happens to us is due to forces we can't control, and sometimes what it's due to our own actions, but the distortion is assuming that it is always one or the other. We might assume that difficult coworkers are to blame for our own less-than-stellar work, or alternatively assume that every mistake another person makes is because of something we did. 8. Fallacy of fairness We are often concerned about fairness, but this concern can be taken to extremes. As we all know, life is not always fair. The person who goes through life looking for fairness in all their experiences will end up resentful and unhappy. Sometimes things will go our way, and sometimes they will not, regardless of how fair it may seem. 9. Blaming When things don't go our way, there are many ways we can explain or assign responsibility for the outcome. One method of assigning responsibility is blaming others for what goes wrong. Sometimes we may blame others for making us feel or act a certain way, but this is a cognitive distortion. Only you are responsible for the way you feel or act. 10. "Shoulds" "Shoulds" refer to the implicit or explicit rules we have about how we and others should behave. When others break our rules, we are upset. When we break our own rules, we feel guilty. For example, we may have an unofficial rule that customer service representatives should be accommodating to the customer. When we interact with a customer service representative that is not immediately accommodating, we might get angry. If we have an implicit rule that we are irresponsible if we spend money on unnecessary things, we may feel exceedingly guilty when we spend even a small amount of money on something we don't need. 11. Emotional reasoning This distortion involves thinking that if we feel a certain way, it must be true. For example, if we feel unattractive or uninteresting in the current moment, we think we are unattractive or uninteresting. This cognitive distortion boils down to: "I feel it, therefore it must be true." Clearly, our emotions are not always indicative of the objective truth, but it can be difficult to look past how we feel. 12. Fallacy of change The fallacy of change lies in expecting other people to change as it suits us. This ties into the feeling that our happiness depends on other people, and their unwillingness or inability to change, even if we demand it, keeps us from being happy. This is a damaging way to think because no one is responsible for our own happiness except ourselves. 13. Global labeling or mislabeling This cognitive distortion is an extreme form of generalizing, in that we generalize one or two instances of "qualities into a global judgment. For example, if we fail at a specific task, we may conclude that we are a total failure in not only that area but all areas. Alternatively, when a stranger says something a bit rude, we may conclude that he or she is an unfriendly person in general. Mislabeling is specific to using exaggerated and emotionally loaded language, such as saying a woman has abandoned her children when she leaves her children with a babysitter to enjoy a night out. 14. Always being right While we all enjoy being right, this distortion makes us think we must be right, that being wrong is unacceptable. We may believe that being right is more important than the feelings of others, being able to admit when we've made a mistake or being fair and objective. 15. Heaven's Reward Fallacy This distortion involves expecting that any sacrifice or self-denial will pay off. We may consider this karma, and expect that karma will always immediately reward us for our good deeds. This results in feelings of bitterness when we do not receive our reward (Grohol, 2016). Many tools and techniques found in cognitive behavioral therapy are intended to address or reverse these cognitive distortions. 9 Essential CBT Techniques and Tools There are many tools and techniques used in cognitive behavioral therapy, many of which can be used in both a therapy context and in everyday life. The nine techniques and tools listed below are some of the most common and effective CBT practices. 1. Journaling This technique is a way to gather about one's moods and thoughts. A CBT journal can include the time of the mood or thought, the source of it, the extent or intensity, and how we reacted, among other factors. This technique can help us to identify our thought patterns and emotional tendencies, describe them, and change, adapt, or cope with them (Uley & Garza, 2011). 2. Unraveling cognitive distortions This is a primary goal of CBT and can be practiced with or without the help of a therapist. In order to unravel cognitive distortions, you must first become aware of the distortions from which you commonly suffer (Hamamci, 2002). Part of this involves identifying and challenging harmful automatic thoughts, which frequently fall into one of the 15 categories listed earlier. 3. Cognitive restructuring Once you identify the distortions you hold, you can begin to explore how those distortions took root and why you came to believe them. When you discover a belief that is destructive or harmful, you can begin to challenge it (Larsson, Hooper, Osborne, Bennett, & McHugh, 2015). For example, if you believe that you must have a high-paying job to be a respectable person, but you're then laid off from your high-paying job, you will begin to feel bad about yourself. Instead of accepting this faulty belief that leads you to think negative thoughts about yourself, you could take an opportunity to think about what really makes a person "respectable," a belief you may not have explicitly considered before. 4. Exposure and response prevention This technique is specifically effective for those who suffer from obsessive-compulsive disorder (OCD; Abramowitz, 1996). You can practice this technique by exposing yourself to whatever it is that normally elicits a compulsive behavior, but doing your best to refrain from the behavior. You can combine journaling with this technique, or use journaling to understand how this technique makes you feel. 5. Interceptive exposure This technique is intended to treat panic and anxiety. It involves exposure to feared bodily sensations in order to elicit the response (Arntz, 2002). Doing so activates any unhelpful beliefs associated with the sensations, maintains the sensations without distraction or avoidance, and allows new learning about the sensations to take place. It is intended to help the sufferer see that symptoms of panic are not dangerous, although they may be uncomfortable. 6. Nightmare exposure and rescripting Nightmare exposure and rescripting are intended specifically for those suffering from nightmares. This technique is similar to interceptive exposure, in that the nightmare is elicited, which brings up the relevant emotion (Pruksma, Cranston, Rhudy, Micol, & Davis, 2018). Once the emotion has arisen, the client and therapist work together to identify the desired emotion and develop a new image to accompany the desired emotion. 7. Play the script until the end This technique is especially useful for those suffering from fear and anxiety. In this technique, the individual who is vulnerable to crippling fear or anxiety constructs a sort of thought experiment in which they imagine the outcome, to worst-case scenario. Letting his conscious play out can help the individual to recognize that everything he or she fears comes to pass, the outcome will still be manageable (Chankapa, 2018). 8. Progressive muscle relaxation This is a familiar technique to those who practice mindfulness. Similar to the body scan, this technique instructs you to relax one muscle group at a time until your whole body is in a state of relaxation (McCallie, Blum, & Hood, 2006). You can use audio guidance, a YouTube video, or simply your own mind to practice this technique, and it can be especially helpful for calming nerves and soothing a busy and unfocused mind. 9. Relaxed breathing This is another technique that will be familiar to practitioners of mindfulness. There are many ways to relax and bring regularity to your breath, including guided and unguided imagery, audio recordings, YouTube videos, and scripts. Bringing regularity and calm to your breath will allow you to approach your problems from a place of balance, facilitating more effective and rational decisions (Megan, 2016). These techniques can help those suffering from a range of mental illnesses and afflictions, including anxiety, depression, OCD, and panic disorder, and they can be practiced with or without the guidance of a therapist. To try some of these techniques without the help of a therapist, see the next section for worksheets and handouts to assist with your practice. Cognitive-Behavioral Therapy Worksheets (PDFs) To Print and Use If you're a therapist looking for ways to guide your client through treatment or a hands-on person who loves to learn by doing, there are many cognitive behavioral therapy worksheets that can help. 1. Coping styles worksheet This PDF Coping Styles Formulation Worksheet instructs you or your client to first list any current perceived problems or difficulties – "The Problem." You or your client will work backward to list risk factors above (i.e., why you are more likely to experience these problems than someone else) and triggers or events (i.e., the stimulus or source of these problems). Once you have defined the problems and understand why you are struggling with them, you then list coping strategies. These are not solutions to your problems, but ways to deal with the effects of those problems that can have a temporary impact. Next, you list the effectiveness of the coping strategies, such as how they make you feel in the short- and long-term, and the advantages and disadvantages of each strategy. Finally, you move on to listing alternative actions. If your coping strategies are not totally effective against the problems and difficulties that are happening, you are instructed to list other strategies that may work better. This worksheet gets you (or your client) thinking about what you are doing now and whether it is the best way forward. 2. ABC functional analysis One popular technique in CBT is ABC functional analysis. This technique helps you (or the client) learn about yourself, specifically, what leads to specific behaviors and what consequences result from those behaviors. In the middle of the worksheet is a box labeled "Behaviors." In this box, you write down any potentially problematic behaviors you want to analyze. On the left side of the worksheet is a box labeled "Antecedents," in which you or the client write down the factors that preceded a particular behavior. These are factors that led up to the behavior under consideration, either directly or indirectly. On the right side is the final box, labeled "Consequences." This is where you write down what happened as a result of the behavior under consideration. "Consequences" may sound inherently negative, but that's not necessarily the case; some positive consequences can arise from many types of behaviors, even if the same behavior also leads to negative consequences. This ABC Functional Analysis Worksheet can help you or your client to find out whether particular behaviors are adaptive and helpful in striving toward your goals, or destructive and self-defeating. 3. Case formulation worksheet In CBT, there are 4 "P's" in Case Formulation: Predisposing factors; Precipitating factors; Perpetuating factors; and Protective factors They help us understand what might be leading a perceived problem to arise, and what might prevent them from being tackled effectively. In this worksheet, a therapist will work with their client through 4 steps. First, they identify predisposing factors, which are those external or internal and can add to the likelihood of someone developing a perceived problem ("The Problem"). Examples might include genetics, life events, or their temperament. Together, they collaborate to identify precipitating factors, which are those external or internal and can add to the likelihood of someone developing a perceived problem ("The Problem"). Examples might include genetics, life events, or their temperament. Together, they collaborate to identify precipitating factors, which are those external or internal and can add to the likelihood of someone developing a perceived problem ("The Problem"). Examples might include genetics, life events, or their temperament. Together, they collaborate to identify precipitating factors, which are those external or internal and can add to the likelihood of someone developing a perceived problem ("The Problem"). 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