Q: **What is cognitive therapy?**
A: Cognitive therapy helps people change their thinking and behavior by practicing problem solving. This short-term therapy is one of the best-studied and most effective forms of therapy. It can help people with depression, anxiety, marital problems and child behavior problems. With cognitive therapy, people develop the skills needed to identify specific emotions, attitudes and behaviors that get in the way of coping with daily problems. People are then able to use these skills to change how they handle problems for the rest of their lives. With hard work, this type of therapy has made big, positive differences in many people’s lives.

Q: **What is the idea behind cognitive therapy?**
A: Cognitive therapy helps people to identify their distressing thoughts and to look at how realistic the thoughts are. When they think more realistically, they feel better. It’s based on the idea that the way we perceive or experience a situation affects how we feel emotionally. For example, one person reading this pamphlet might think, “Wow! This sounds good; it’s just what I’ve always been looking for!” and feel happy. Another person reading this information might think, “Well, this sounds good but I don’t think I can do it.” This person feels sad and discouraged. So it is not a situation that directly affects how a person might feel emotionally, but rather, the person’s thoughts in that situation. When people are in a crisis, they often do not think clearly and their thoughts are unrealistic or exaggerated.

Q: **Terrible things have happened to me. How can cognitive therapy help?**
A: Cognitive therapy focuses on the here and now by examining how your past affects your present.

Q: **What can I do to get ready for therapy?**
A: An important first step is to set goals. Ask yourself, “How would I like to be different by the end of therapy?” Think specifically about:

- Changes you’d like to make at work, at home, and in your relationships with family, friends and others.
- Symptoms that have been bothering you and which you’d like to decrease or get rid of altogether.
- Activities that would improve your life: pursuing spiritual, intellectual or cultural interests; increasing exercise, dropping bad habits, learning new interpersonal skills; or improving management skills at work or home.

The therapist will help you evaluate and refine these goals and help you decide which goals you might be able to work at on your own and which ones you might want to work on in therapy.
What Should I Know About Cognitive Therapy? (continued)

**Q:** What happens during a typical therapy session?

**A:** Before your therapy session begins, your therapist will have you fill out a form to assess your mood. This form gives you and the therapist a clear way of assessing your progress. One of the first things your therapist will do in the therapy session is look at how you’ve been feeling this week, compared to other weeks. This is called a mood check.

The therapist will also ask you what problem you’d like to put on the agenda for that session and ask you what happened during the last week that was important. Agendas help you and your therapist stay focused on what you want from the therapy session.

The therapist will connect the last therapy session and this week’s therapy session by asking you what seemed important that you discussed during the last session. Your therapist might suggest practice activities to try at home during the week. During the therapy session, you will discuss those activities, as well as whether there is anything about the therapy that you would like to see changed.

Next, you and the therapist will discuss the problem or problems you put on the agenda and do problem-solving activities together. How did you react emotionally to a situation? What were your thoughts? What did you do or not do because of the problem? Cognitive therapy teaches us to look at problems in a balanced way — not all positive, not all negative — but in a realistic way. You will learn new skills with this therapy.

Also, you and the therapist will discuss how in the coming weeks you can make best use of what you’ve learned during the session. The therapist will list the important points of the session and ask you for feedback: what was helpful about the session, what was not, anything that bothered you, anything the therapist didn’t get right, anything you’d like to see changed.

As you will see, both therapist and client are active and work together in this type of therapy.

**Q:** How long does therapy last?

**A:** Cognitive therapy usually lasts between 15 and 20 sessions. In the beginning, clients are seen once or twice a week. As soon as they feel better and seem ready, the sessions are scheduled once every week. Eventually, the client and therapist will agree to try therapy once every two weeks, then once every three or possibly four weeks.

This slow, gradual way of tapering sessions allows you to practice the skills at home while still in therapy. It is a good way to prepare yourself to keep employing the skills you have learned after your final session. Once therapy has ended, many people find support groups and cognitive therapy workbooks helpful.
Q:  How can I make the best use of therapy?

A:  One way is to ask your therapist how you can supplement your therapy with cognitive therapy readings, workbooks, client pamphlets, etc. A second way is to prepare carefully for each session, thinking about what you learned in the previous session and jotting down what you want to discuss in the next session.

A third way to make the most of therapy is to make sure that you try to bring the therapy session into your everyday life. A good way to do this is by taking notes at the end of each session or recording the session. Make sure that you and the therapist leave enough time in the therapy session to discuss what would be helpful for you to do during the coming week. You may also try to predict what problems you might encounter when doing these assignments so your therapist can help you try to solve them.

This document is adapted from Questions & Answers about Cognitive Therapy by Judith S. Beck, Ph.D. Director, Beck Institute for Cognitive Therapy and Research. www.beckinstitute.org.