

Name: Brianna Cheever

CBT IDEAL DIALOGUE

Ten examples of dialogue that you may hear from a therapist during a CBT therapy session are presented below. These examples demonstrate poor or ineffective skills by the therapist. For each example, construct a corrected dialogue that demonstrates a therapist's effective use of the skills. See rubric for points distribution.

1. Greeting the client/Introductions:

Therapist: Hey, I'm Sally, I'll be your therapist, are you ready to get started?

Corrected Dialogue: Hello, I'm Brianna Cheever and I will be your therapist. What is your name? And what would you like for me to call you? It's nice to meet you [insert name here].

2. Mood Check:

Therapist: Tell me how you've felt this past week.

Corrected Dialogue: [after prioritizing the main issue and emotion the client has been feeling the past week]. So, you mentioned that you felt [emotion] this past week. On a scale of 1-10, with 1 being the lowest (no [emotion]) and 10 being the highest (strongest [emotion]), what score would you say you felt this week with your [emotion]?

3. Setting the agenda:

Therapist: Today I thought we'd talk about some of the situations that are causing you anxiety. I'll probably assign you some homework to do before the next session. Does that sound alright?

Corrected Dialogue: For today's session, we will go over several different things. First, we will do a mood check, then we will obtain a brief update on how you've been feeling the past week. We will prioritize what problem has been bothering you the most this past week, and then set some goals to look forward to. We will discuss CBT techniques, work on the problem that has been bothering you, and then we will come up with some homework together for you to do for your session next week to assist you in overcoming this problem. We will then summarize the session, and you can provide feedback on what you think. Does that sound alright with you?

4. Confidentiality:

Therapist: Everything we talk about will be kept confidential. Do you have any questions?

Corrected Dialogue: Before we get started, there are a couple things I would like to review with you. Everything you say in these sessions will be kept confidential, which means I will not share it with anyone. The only times I will need to break that confidentiality is if you mention anything regarding the abuse of a child or elder, or if you confide that you plan to hurt yourself or others. I am a mandated reporter, which means I am required to report these situations. Other than those situations, what you say in this room stays in this room. Does that make sense to you, and is that alright with you?

5. Identify Automatic Thoughts:

Therapist: What's happening in your mind right now?

Corrected Dialogue: So you said you felt [insert emotion] when [event] happened. What was a thought that you had right before you felt that emotion?

6. Working with Automatic Thoughts:

Therapist: The way you are thinking is called fortune telling and you need to just stop thinking that you can predict the future, nobody can do that.

Corrected Dialogue: So you won't get that job that you have been wanting. What are some reasons you think you won't get that job? Ok, now what are some things that may make you think you could get the job? What is the most likely outcome? The way of thinking you are doing is called fortune telling. It is where you try to predict the future and assume that things are going to get worse. But we don't know the future, so it's unhelpful to try to predict the future.

7. Working with Automatic Thoughts:

Therapist: This thought is bad, you should try to think positive thoughts instead.

Corrected Dialogue: The thought you are describing to me is what we call an unhelpful thought. It can cause you to see things in a distorted perspective, which can lead to anxiety and [emotion felt with thought]. But if you are able to recognize when you are having that unhelpful thought, you can change the thought, which will lead to a change in your emotions and eventually your actions. Does that make sense to you?

8. Elicit Summary:

Therapist: Today we mostly focused on your anxiety and we talked about some ways you can cope with it this week.

Corrected Dialogue: So to summarize, we did a mood check where you told me you felt [insert number] out of 10. We talked about confidentiality and how everything you say in this session will be kept between you and me unless you intend to hurt yourself or someone else or divulge a situation where there is child or elder abuse involved. We also discussed some of your automatic thoughts, and some CBT techniques to overcome those thoughts. We talked about how trying to predict the future is unhelpful, and it is better to think about what you can do now. We also discussed other unhelpful thoughts and how you can recognize those thoughts and change your emotions by changing those thoughts.

9. Homework:

Therapist: For this next week I'd like you to track how many times you felt anxious.

Corrected Dialogue: So for this next week, why don't we come up with an assignment together to help with those feelings of anxiety. We discussed the thoughts that seem to lead to your feelings of anxiety. What are some ways you can try to track those thoughts? What about if you write down each time you are feeling anxious and write down the thought you had right before that feeling? Would that be something you could do?

10. Elicit Feedback:

Therapist: Do you have any complaints about the session today?

Corrected Dialogue: So on a scale of 0-10, how are you feeling now that we have had our discussion today? What do you think of the session today? Was it helpful to you? Is there anything you would like to focus more on next session?

CBT Ideal Dialogue Rubric

Skill Demonstrated	Possible Points	Score
Greeting Client	3	
Mood Check	3	
Setting the Agenda	3	
Confidentiality	3	
Identify Automatic Thoughts	3	
Working with Automatic Thoughts	3	
Working with Automatic Thoughts	3	
Elicit Summary	3	
Homework	3	
Elicit Feedback	3	