

## Knowledge of common cognitive biases relevant to CBT

An ability to draw on knowledge of the common information processing biases (“cognitive distortions”) that are observed in all individuals, but which are especially relevant to the ways in which clients think\*:

all or nothing thinking – viewing a situation in only two categories rather than on a continuum (e.g. oversimplifying events or beliefs as good/ bad or as right/wrong)

catastrophising – predicting the future negatively without considering alternative outcomes

disqualifying or discounting the positive – telling yourself that positive experiences/ qualities do not count

emotional reasoning – reasoning from how you feel rather than from any evidence

Labelling – putting a fixed, global label on self or others without considering evidence that would lead to a less disastrous conclusion

magnification/ minimisation - exaggerating the negative and minimising the positive (blowing things out of proportion or shrinking their importance)

selective abstraction – paying undue attention to negative detail rather than seeing the whole picture

‘mind-reading’ – making (negative) assumptions about the way in which others think about you when there is no evidence for this

overgeneralisation – drawing a sweeping conclusions from a single incident and applying it to related and to unrelated situations

personalisation – relating external events to yourself when there is no basis for making such a connection

making ‘should’ and ‘must’ statements (“imperatives”) – having an over-precise idea of how they and others should behave, and overestimating the consequences of how bad it would be not to meet these expectations

tunnel-vision – only seeing the negative aspects of a situation

Knowledge of the role of processing biases in the development and maintenance of problems

Source: Beck, J. (1995) Cognitive therapy: Basics and beyond New York: Guilford press