CBT Tip of the Week, from Dr. Lee Rosen, Ph.D.

Distinguishing thoughts and feelings

A core skill in CBT is conceptually separating thoughts from feelings. Internal experiences often come to us in mush of these two phenomena. For example, on clerkship you might be queried by a preceptor, not know the answer, and be faced, simultaneously, with a thought of inadequacy and feeling of shame. Not too fun. In CBT, we ask you to break down this experience, because it can be useful to approach the thought and the feeling differently.

- With the thoughts – e.g., “I’m so stupid; I’m not going to succeed,” – the most helpful intervention is:
  - First notice and articulate the thoughts
  - Then ask yourself, “Is that helpful?” (This is an amazingly fruitful question about thoughts.)
  - If the answer is, “Probably not,” then experiment with different thoughts, something more helpful:
    - “I’ll look that up tonight. I can’t know everything. I’m learning every day. There will be many more questions to answer, and I will engage fully in investigating the knowledge, and... I will still get it wrong sometimes.”

- With the feeling, the task is a little different.
  - Again, first thing is notice and identify, as in, “I notice I feel ashamed.”
  - Then, do nothing in reaction. Breathe, accept the feeling, watch it transform by itself over time into something else. Feelings are always temporary; it is our reactivity to them that is problematic (more on that next time).

As always in CBT, practice and repetition are key.