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*Cognitive Distortions*

Description	Example(s)	Solutions
<p><u>All-or-Nothing Thinking:</u> Thinking in black-and-white categories regarding self and others.<sup>2</sup></p>	<p>“The internet is the only place where I’m respected.”</p> <p>“I’m worthless when I’m not on the internet.”</p>	<p>“Cost-Benefit Analysis:” reflect the advantages and the disadvantages of these negative thoughts and feelings. Does this thought/feeling benefit you? Why or why not?</p>
<p><u>Overgeneralization:</u> Viewing a single negative event as a never-ending cycle of misfortune or failure. Over-generalizing consists of utilizing words such as “always” and “never.”<sup>3</sup></p>	<p>“I never get enough sleep.”</p> <p>“I’m always wide awake right before bedtime.”</p>	<p>For those with insomnia and other sleep-related issues, write down/record in a journal the times you go to bed, wake up, have disrupted sleep, peaceful sleep, etc. “Thinking in Shades of Grey:” evaluate findings on a range of 0 to 100; this allows one to analyze these findings/experiences as a partial success and not a complete failure.</p>
<p><u>Mental Filter:</u> Dwelling on a single, negative detail to the point where positives are overlooked.<sup>4</sup></p>	<p>Thinking, “I’m doing very poorly at work” after receiving one negative customer satisfaction report.</p>	<p>“The Double Standard Method:” instead of talking to oneself in a harsh, critical way, try speaking in the way a close friend or loved one would - with compassion and understanding</p>
<p><u>Discounting the Positive:</u> Believing that one’s positive qualities/characteristics “don’t count” or aren’t “good enough.”<sup>4</sup></p>	<p>“I’m not a valued employee at my place of work”- although this person always arrives to work on time and prepared.</p>	<p>“The Survey Method:” if one believes one is not a valued employee, he may ask his fellow co-workers if they feel the same way (survey them).</p>
<p><u>Jumping to Conclusions:</u> Making decisions with certainty based on lacking information.<sup>5</sup> There are two different features of this distortion:</p> <ol style="list-style-type: none"> <li>1. Mind reading - concluding that someone is reacting negatively to you</li> </ol>	<p>“When the teacher laughed during my drama performance, it wasn’t because they thought it was funny, it was because they thought it was so stupid.”</p>	<p>“Examine the Evidence:” examine the evidence for this decision. For example, one may analyze the times they had brought their lucky rabbit’s foot to the casino, but still didn’t win.</p>

<p>2. Fortune telling - predicting that bad things will happen.<sup>4</sup> “Fortune telling” is also similar to the cognitive distortion “Illusion of Control” among gamblers: the perceived ability to control gambling outcomes.<sup>6</sup></p>	<p>“If I bring my lucky rabbit’s foot to the casino tonight, I’ll win big playing poker.”</p>	
<p><u>Magnification/Minimization:</u> Placing an overemphasis on the negatives and underemphasis on the positives.<sup>7</sup></p>	<p>“It’s no big deal - everyone breaks the law.”  “I’m totally going to fail that test.”</p>	<p>“Identifying the Distortion:” write down negative thoughts in order to identify the distortion; making it easier to think about what is being experienced in a more positive way.</p>
<p><u>Emotional Reasoning:</u> Basing reasoning on the way that one feels.<sup>8</sup></p>	<p>“If I feel anxious, it’s because there is danger.”  “If I feel disgusted, it must be contagious.”</p>	<p>Due to this distortion being especially prevalent in people with high contamination fears (i.e. OCD), there is encouragement for interventions that target and cover disgust-based reasoning - thereby reducing fear contamination. “The Experimental Technique:” if one feels anxious and believes there is danger, evaluate the situation. For example, in the episode of panic and feeling as if a heart attack will occur, doing jumping jacks will prove that the heart is healthy and working properly.</p>
<p><u>Should Statements:</u> Criticizing oneself with “shoulds” and “shouldn’ts.”<sup>4</sup></p>	<p>“I shouldn’t have been so stupid.”  “I should just leave it be and forget about it.”</p>	<p>“The Semantic Method:” reframing these thoughts into more positive ones. For example, instead of telling oneself, “I shouldn’t have been so stupid,” it would be better to say, “Next time, I will be more mindful of certain situations.”</p>
<p><u>Labeling:</u> Attaching negative, paradoxical labels to oneself.<sup>4</sup></p>	<p>“I’m a failure.”  “I’m nobody.”</p>	<p>“Define Terms:” identifying one’s personal labels, and then defining them. For example, what is a “failure?” What makes one a “nobody?” The goal is to show that these definitions aren’t relatable to the person.</p>
<p><u>Personalization/Blame:</u> Holding oneself or others personally accountable for events that were out of their control.<sup>9</sup> Ultimately, personalization leads to feelings of resentment and guilt.<sup>4</sup></p>	<p>“If only I were more sexually available for him, he wouldn’t have cheated on me.”  “If an intoxicated woman walks alone late at night, it’s her own fault if she’s sexually assaulted.”</p>	<p>“Re-attribution:” enables one to realize that mistakes do not define who they are as a person. For example, if one believes they are a bad father, they should try to come up with factors that contributed to coming up with this belief, instead of</p>

		blaming oneself for the entire situation. This insight provides solutions.
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- <sup>3</sup>Takano, K., Boddez, Y., & Raes, F. (2016). I sleep with my Mind's eye open: Cognitive arousal and overgeneralization underpin the misperception of sleep. *Journal of Behavior Therapy and Experimental Psychiatry*, 52, 157-165. <https://doi.org/10.1016/j.jbtep.2016.04.007>
- <sup>4</sup>Burns, D. D. (1999). *The feeling good handbook*. New York, NY: Plume.
- <sup>5</sup>So, S. H. W., Siu, N. Y. F., Wong, H. L., Chan, W., & Garety, P. A. (2016). 'Jumping to conclusions' data-gathering bias in psychosis and other psychiatric disorders—Two meta-analyses of comparisons between patients and healthy individuals. *Clinical Psychology Review*, 46, 151-167. <https://doi.org/10.1016/j.cpr.2016.05.001>
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