



CLINICAL REFERENCE GUIDE

Cognitive & Grounding Strategies

A comprehensive toolkit for therapists and clients — evidence-based techniques drawn from CBT, ACT, DBT, and mindfulness-based approaches to manage distressing thoughts, regulate emotions, and reconnect with the present moment.

Part 1: Cognitive Strategies

Cognitive strategies help identify, examine, and shift unhelpful thought patterns. These tools are most effective when practiced consistently — not just during moments of distress, but as a regular habit of mental awareness.

Thought Records (CBT)

Cognitive Behavioral Therapy

- Identify the triggering situation and the automatic thought.
- Rate your belief in the thought (0–100%) and the emotion intensity.
- Examine the evidence for and against the thought.
- Generate a balanced, alternative perspective.
- Re-rate your belief and emotion after the reframe.

◆ **Use a 3-column (situation / thought / feeling) or 5-column format depending on depth needed.**

Cognitive Defusion (ACT)

Acceptance & Commitment Therapy

- Notice the thought: "I'm having the thought that..."
- Name it: "There goes my mind doing the 'not good enough' story again."
- Visualize thoughts as leaves floating down a stream.
- Repeat the thought rapidly for 30 seconds — notice it loses meaning.
- Thank your mind: "Thanks, mind. I've got this."

◆ **Defusion reduces the literal believability of thoughts without fighting them.**

Socratic Questioning

CBT / Guided Discovery

- What is the evidence this thought is true? What contradicts it?
- Am I confusing a thought with a fact?
- What would I tell a close friend who had this thought?
- What is the most realistic outcome — not the worst, not the best?
- Is this thought helpful, or is it keeping me stuck?

◆ **Avoid rapid-fire questioning — let the client sit with each question.**

Identifying Cognitive Distortions

CBT

- All-or-nothing thinking: "I always fail" / "It's never good enough."
- Catastrophizing: Assuming the worst possible outcome will happen.
- Mind reading: Assuming you know what others think.



- Emotional reasoning: "I feel it, so it must be true."
- Should statements: Rigid rules that create shame and pressure.
- Personalization: Taking excessive responsibility for external events.

◆ ***Naming the distortion is often the first step to loosening its grip.***

Behavioral Experiments

CBT

- Identify the belief to test (e.g., "If I speak up, people will judge me").
- Design a small, safe experiment to test the belief in real life.
- Predict what will happen before the experiment.
- Carry out the experiment and observe what actually happens.
- Compare the prediction to the outcome and update the belief.

◆ ***Experiments are more powerful than verbal reframes alone.***

Values Clarification (ACT)

Acceptance & Commitment Therapy

- Ask: What kind of person do I want to be in this area of my life?
- Identify 3–5 core values (e.g., connection, honesty, growth).
- Notice when behavior aligns with vs. moves away from values.
- Use values as a compass when thoughts create confusion.
- Committed action: Take one small step toward a value today.

◆ ***Values are not goals — they are directions, not destinations.***

Motivational Interviewing Techniques

MI / Client-Centered

- Open-ended questions: Ask questions that invite exploration, not yes/no answers.
- Affirmations: Acknowledge strengths and efforts genuinely.
- Reflective listening: Reflect back both content and emotion.
- Summarizing: Periodically collect and link what the client has shared.
- Explore ambivalence: 'What are the good things about the current situation? What concerns you?'
- Elicit change talk: 'What would be different if things changed?'

◆ ***MI works with resistance rather than against it — ambivalence is normal, not a problem.***

Psychoeducation & Normalizing

Psychoeducation

- Explain the fight-flight-freeze response and how it relates to anxiety.
- Normalize the experience: 'Your brain is doing exactly what it was designed to do.'
- Teach the window of tolerance: optimal arousal vs. hyper/hypo-arousal.
- Explain the thought-emotion-behavior cycle and how each influences the others.
- Validate that insight alone rarely creates change — practice and repetition do.
- Use metaphors: 'Your nervous system is like a smoke alarm that's a little too sensitive.'

◆ ***Psychoeducation reduces shame and increases engagement with treatment.***



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Part 2: Grounding Strategies

Grounding techniques anchor attention to the present moment, interrupting dissociation, anxiety spirals, and trauma responses. They work by engaging the senses and the body to shift the nervous system out of fight-flight-freeze.

5-4-3-2-1 Sensory Method

Mindfulness / Sensory Grounding

- 5 things you can SEE — name each one aloud or silently.
- 4 things you can TOUCH — notice texture, temperature, weight.
- 3 things you can HEAR — near sounds, distant sounds, subtle sounds.
- 2 things you can SMELL — or imagine two calming scents.
- 1 thing you can TASTE — or take a slow sip of water.

◆ **Slow down between each sense — the pause is part of the technique.**

Box Breathing (4-4-4-4)

Somatic / Physiological

- Inhale slowly through the nose for 4 counts.
- Hold the breath gently for 4 counts.
- Exhale slowly through the mouth for 4 counts.
- Hold empty for 4 counts.
- Repeat 4–6 cycles. Increase counts to 6 or 8 as tolerated.

◆ **Activates the parasympathetic nervous system within 60–90 seconds.**

Cold Water Reset

Somatic / DBT TIPP Skill

- Submerge hands or face in cold (not ice) water for 15–30 seconds.
- Alternatively, hold an ice cube in the palm.
- Focus entirely on the physical sensation — temperature, pressure.
- Breathe slowly while in contact with the cold.
- Notice the shift in body state after releasing.

◆ **Cold water activates the dive reflex, rapidly slowing heart rate.**

Feet on the Floor

Somatic / Mindfulness

- Press both feet firmly and flatly onto the floor.
- Notice the pressure, texture, and temperature beneath your feet.
- Wiggle your toes slowly and feel each one.
- Take 3 slow breaths while keeping attention on your feet.
- Say aloud: "I am here. I am safe. This is now."

◆ **Especially useful for dissociation and flashback interruption.**



Safe Place Visualization

Mindfulness / EMDR Preparation

- Close your eyes and picture a place — real or imagined — where you feel completely safe.
- Notice the sights: colors, light, shapes around you.
- Notice the sounds: gentle, distant, or quiet.
- Feel the air temperature and any physical sensations.
- Give this place a name or a word you can use as an anchor.

◆ **Strengthen this resource by visiting it briefly during calm sessions.**

Progressive Muscle Relaxation

Somatic / Behavioral

- Start at the feet: tense the muscles tightly for 5 seconds.
- Release and notice the contrast between tension and relaxation.
- Move upward: calves, thighs, abdomen, hands, arms, shoulders, face.
- Breathe slowly throughout — exhale on each release.
- End with a full-body scan, noticing areas of remaining tension.

◆ **Most effective when practiced daily, not only during distress.**

Grounding Object

Sensory / Portable

- Choose a small object with interesting texture (stone, fabric, bead).
- Hold it in your hand and focus all attention on its physical qualities.
- Describe it silently: shape, weight, temperature, surface, edges.
- Use it as a cue to return to the present when the mind wanders.
- Carry it as a portable grounding anchor during difficult situations.

◆ **Particularly helpful for children and clients with trauma histories.**

Mindful Body Scan

Mindfulness-Based Stress Reduction

- Lie down or sit comfortably. Close your eyes.
- Bring attention slowly from the top of the head downward.
- Notice sensations — warmth, tingling, tightness, neutrality — without judgment.
- If the mind wanders, gently return to the body part you were scanning.
- Complete the scan at the feet, then take 3 full breaths.

◆ **Builds interoceptive awareness — the ability to notice body signals.**



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Part 3: DBT Distress Tolerance & Emotion Regulation

Dialectical Behavior Therapy (DBT) offers structured skills for tolerating distress without making things worse, and for understanding and regulating emotional responses. These skills are especially effective for clients with high emotional sensitivity.

TIPP Skills

DBT — Crisis Survival

- Temperature: Cold water on face/wrists to rapidly reduce emotional intensity.
- Intense Exercise: 20 minutes of vigorous movement to burn off stress hormones.
- Paced Breathing: Slow the exhale to be longer than the inhale (e.g., 4 in / 6 out).
- Progressive Relaxation: Systematically tense and release muscle groups.

◆ **TIPP works on the body first — change the physiology to change the emotion.**

ACCEPTS (Distraction)

DBT — Distress Tolerance

- Activities: Engage in something absorbing (puzzle, walk, creative project).
- Contributing: Do something kind for someone else.
- Comparisons: Compare to a harder time you survived.
- Emotions: Watch a movie or listen to music that creates a different feeling.
- Pushing away: Mentally set the problem aside temporarily.
- Thoughts: Engage the mind with a counting task or trivia.
- Sensations: Use strong sensory input (spicy food, cold shower).

◆ **Distraction is a bridge — not avoidance — when used intentionally.**

PLEASE Skills

DBT — Emotion Regulation

- Physical illness: Treat physical health — pain increases emotional vulnerability.
- Eating: Eat balanced meals; avoid skipping or bingeing.
- Avoid mood-altering substances: Alcohol and drugs amplify emotions.
- Sleep: Prioritize consistent, adequate sleep.
- Exercise: Move your body daily, even briefly.

◆ **Emotional regulation starts with the basics — the body is the foundation.**

Opposite Action

DBT — Emotion Regulation

- Identify the emotion and the urge it creates (e.g., shame → hide).
- Check: Does acting on this urge fit the facts? Is it effective?
- If not, do the opposite: shame → reach out; fear → approach; anger → be gentle.



- Act "all the way" — body language, tone, and behavior all matter.
- Repeat until the emotion shifts.

◆ **Opposite action changes the emotion by changing the behavior first.**

Radical Acceptance

DBT — Distress Tolerance

- Acknowledge the reality of the situation exactly as it is.
- Notice resistance: "I shouldn't have to deal with this."
- Remind yourself: Acceptance ≠ approval. It means stopping the fight with reality.
- Practice acceptance statements: "This is what is. I can cope with this."
- Repeat as needed — radical acceptance is a practice, not a one-time decision.

◆ **Pain is inevitable; suffering is the refusal to accept pain.**

Check the Facts

DBT — Emotion Regulation

- Identify the emotion you want to change.
- Describe the event that prompted the emotion (facts only, no interpretations).
- Identify your interpretation — what story are you telling about the facts?
- Ask: Does my emotion fit the facts of the situation, or my interpretation?
- If the emotion doesn't fit the facts, use Opposite Action or Problem Solving.

◆ **Emotions are valid — but they are not always accurate signals about reality.**

Quick Reference: When to Use Which Strategy

Situation	Recommended Strategy	Modality
Racing, looping thoughts	Thought Records, Defusion, Thought Loop steps	CBT / ACT
Panic or acute anxiety	Box Breathing, TIPP, 5-4-3-2-1	Somatic / DBT
Dissociation or flashback	Feet on the Floor, Cold Water, Grounding Object	Somatic
Overwhelming emotion	ACCEPTS, Opposite Action, Radical Acceptance	DBT
Negative self-talk	Socratic Questioning, Cognitive Distortions, Defusion	CBT / ACT
Emotional dysregulation	PLEASE Skills, Check the Facts, Body Scan	DBT / Mindfulness
Feeling disconnected from self	Values Clarification, Safe Place, Body Scan	ACT / Mindfulness
Avoidance / stuck behavior	Behavioral Experiments, Opposite Action, Values	CBT / ACT / DBT

No single strategy works for everyone. The goal is to build a personalized toolkit — a set of go-to strategies that feel accessible, effective, and sustainable for each individual.