

CBT Coping Cards

Practical Tools to Strengthen Coping Skills & Cognitive Flexibility

By River's Bend Clinical Team

“Thoughts are not facts. They’re signals—opportunities to pause, reflect, and choose differently.”

— AMY FRESCH, River's Bend Clinical Director, MA, LPC

How to Use These Cards

Use these CBT Coping Cards in moments of emotional distress, cravings, or cognitive distortion.

They're designed to help you:

- Recognize and challenge negative thought patterns
- Practice cognitive reframing
- Apply coping behaviors that align with your recovery and mental health goals

For Clinicians: Assign one card between sessions as “CBT reinforcement homework,” or use during group therapy to spark discussion.

For Clients: Keep the cards on your phone, in your wallet, or journal. Use one per day as part of your daily reflection or coping routine.

Identify the Thought

Prompt:

What automatic thought just went through your mind when you started feeling anxious, sad, or frustrated?

Example:

“I can’t handle this.”

“They don’t care about me.”

“I always mess things up.”

Exercise:

Write down the thought exactly as it appeared. Don’t edit or judge it—just notice.

My Thought:

Clinician Tip:

Use this card to increase metacognitive awareness. Encourage clients to practice “thought catching” throughout the week and bring 3–5 examples to the next session.

Label the Distortion

Prompt:

Is your thought based on fact, or a common cognitive distortion?

Examples of Distortions:

- All-or-Nothing Thinking (“If I slip once, I’ve failed.”)
- Catastrophizing (“This will ruin everything.”)
- Personalization (“This is my fault.”)
- Mind Reading (“They must be disappointed in me.”)
- Overgeneralization (“Nothing ever goes right.”)

Exercise:

Circle which distortion fits best, or note if more than one applies.

Clinician Tip:

Pair this card with psychoeducation about cognitive distortions; review patterns at session end to identify recurring distortions.

Challenge the Thought

Prompt:

What evidence supports this thought?
What evidence challenges it?

Exercise:

- Column A – What supports my thought
- Column B – What disproves it

Evidence For

Evidence Against

Clinician Tip:

Guide clients to differentiate between assumptions and observable facts. Reinforce Socratic questioning (“What’s another explanation?”).

Replace the Thought

Prompt:

How can you reframe this thought in a more balanced or compassionate way?

Example:

“I can’t handle this.” → “This feels hard, but I’ve handled similar situations before.”

Exercise:

Rewrite your new thought below.

Clinician Tip:

Encourage clients to keep a “Reframed Thought Log” and revisit successful reframes weekly.

Choose a Coping Behavior

Prompt:

What healthy behavior can support this new thought?

Examples:

- Take a walk
- Use grounding or breathing
- Call a supportive person
- Journal
- Attend a support meeting

Exercise:

Write one coping behavior and when you'll do it:

Clinician Tip:

Reinforce behavioral activation—especially for clients with depressive or relapse-related avoidance patterns.

Practice the Pause

Prompt:

When triggered, can you delay your reaction by 60 seconds?

Exercise:

1. Take a deep breath.
2. Notice what your body feels (tightness, warmth, racing heart).
3. Ask yourself: “What do I need right now to stay safe or calm?”

Clinician Tip:

Use this in relapse prevention work or emotional regulation sessions to strengthen impulse control and mindfulness.

Self-Compassion Check-In

Prompt:

What would you say to a client or friend who had this thought or feeling?
Now, say it to yourself.

Exercise:

Complete this sentence:

“It’s okay that I feel _____. I’m doing my best to _____.”

Clinician Tip:

Integrate this into trauma-informed CBT or schema work to reduce shame-based cognitions.

Reconnect with Values

Prompt:

What value matters most to you right now—peace, honesty, family, health, service?

Exercise:

Describe one small action you can take today that honors that value.

Example:

Value: “Connection” → Action: “Call my sponsor instead of isolating.”

Clinician Tip:

Use this card in motivational interviewing or relapse prevention planning; it links cognitive change to values-driven behavior.

Reflect on Progress

Prompt:

What thoughts or behaviors have improved since starting therapy or recovery?

Exercise:

List 2–3 examples of growth or resilience:

Clinician Tip:

End CBT modules or group cycles with this reflection to reinforce self-efficacy and progress recognition.

Plan for the Future

Prompt:

What coping skill do you want to strengthen next week?

Exercise:

Identify the skill: _____

Choose when and where to practice it: _____

Note one barrier and one solution: _____

Clinician Tip:

Use as a weekly goal-setting tool during discharge planning or relapse prevention sessions.

Using the Cards as a Routine

Encourage clients to:

- Select **one card per day** as a daily coping focus
- Pair it with **journaling or mindfulness**
- Review progress with their therapist weekly
- Share favorite cards with family or support networks to model communication

Download Instructions

Download the full printable set of CBT Coping Cards

Each card is designed for 3x5 or half-sheet format, perfect for printing or digital journaling.
For professionals: Cards include prompts that align with session goals for CBT, DBT, and relapse prevention integration.
For clients: Each card serves as a standalone mini coping plan, portable, practical, and empowering.

About River's Bend

River's Bend has been a leader in **evidence-based outpatient behavioral healthcare since 1995**, offering Intensive Outpatient (IOP), Partial Hospitalization (PHP), and specialized programs for mental health and substance use disorders.
Our clinical teams integrate **CBT, DBT, trauma-informed care, and motivational enhancement** to ensure every client receives comprehensive, individualized support.

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