Behavioural experiment

Make a specific prediction and a fair test. Plan any safeguards before practice; record observations afterwards.

Editable PDF: replace or delete the fictional examples. Blank PDF: print and write. Guidance follows.

BEFORE PRACTICE

Prediction / belief 0-100% / another possibility

e.g. If I ask a question, people will laugh. Belief 75%. They may answer normally.

My task / where / what I will look for

e.g. Ask one relevant question and observe the response.

Safety habit to vary; real precautions and support to keep

e.g. Reduce rehearsing; keep any communication support I need.

AFTER PRACTICE - observations and learning

What actually happened

e.g. A colleague answered and the discussion continued.

Learning / prediction now / next step

e.g. No laughter this time. Repeat in another suitable meeting.

Plan this exercise with your therapist and keep necessary care, access support and real precautions.

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Using this resource

Behavioural experiment

What this helps with

An experiment is an opportunity to learn from experience. It differs from simply enduring a difficult situation: you name a prediction and choose an action that can give you useful information about it. The result can support, weaken or complicate your prediction. That is still learning. Plan a small, ordinary action and decide what you will observe before starting, so the review does not become a search for certainty afterwards.

How to use it

1. State a testable prediction and an alternative possibility. Rate belief if useful.
2. Plan one action, when and where, and the observation that would help you learn.
3. Identify one unnecessary safety habit to vary, keeping real safety measures.
4. Agree practical support and limits; seek therapist guidance for demanding or symptom-focused tasks.
5. Record observations, compare them with both predictions and plan any useful next test.

A fictional worked example

Maya predicts, 'If I ask a question in the meeting, people will tell me I should already know', with 80/100 belief. An alternative is that the question will be answered normally. She plans to ask one relevant question, without apologising repeatedly first, and notice the actual reply. Her manager answers and another colleague asks for clarification too. No one criticises her. Maya still feels flushed, but that was not the outcome she was testing. She learns that asking once can be useful and plans a similar experiment in a different meeting. One result does not guarantee every future response.

Keep in mind

Do not use experiments to test actual hazards, stop prescribed treatment or provoke physical symptoms without appropriate assessment. ERP, trauma work and fainting-related practice need individual planning. Choose support and adaptations collaboratively; the goal is learning, not proving bravery.

Sources and attribution

Bennett-Levy, J., et al. (Eds.). (2004). Oxford guide to behavioural experiments in cognitive therapy. Oxford University Press.

Roth, A. D., & Pilling, S. (2007). The competences required to deliver effective CBT for people with depression and anxiety disorders. UCL competence framework.

Original material informed by the sources above. No outside organisation endorses this worksheet.

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