Bitesize Guide to

Evidence-Based

Therapy for Anxiety,

Trauma, Depression,

and Emotional

Wellbeing

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Looking for the right type of therapy?

This practical, research-informed guide will help you understand different evidence-based therapies and how they support recovery from anxiety, trauma, depression, low self-esteem, and emotional overwhelm.

Whether you're experiencing mental health symptoms, processing trauma, or exploring personal growth, understanding your therapy options can help you make an informed, empowered decision.

What Is Evidence-Based Therapy?

Evidence-based therapy refers to psychological treatments supported by scientific research and clinical guidelines (such as NICE in the UK and APA in the US).

These therapies are effective for specific mental health difficulties and can be adapted to suit your cultural background, neurodivergence, communication style, and personal life experiences.

Types of Therapy and How They Work

Cognitive Behavioural Therapy (CBT)

CBT is a structured, present-focused approach that helps people identify and challenge unhelpful thoughts and behaviours. It teaches practical coping skills to manage anxiety (including generalised anxiety disorder, social anxiety, health anxiety, panic attacks, and phobias), depression, OCD, and PTSD. In therapy, you might work with your therapist to examine negative automatic thoughts ("I always fail"), gather evidence to challenge them, and gradually face feared situations through behavioural experiments. CBT is often short-term and goal-oriented, making it one of the most widely researched and recommended therapies worldwide.

Acceptance and Commitment Therapy (ACT)

ACT is a mindfulness-based therapy that helps you develop a new relationship with difficult thoughts and feelings rather than fighting them. You learn to notice and accept internal experiences ("I'm having the thought that I'll embarrass myself"), while making choices guided by your values (like social connection or personal growth). ACT is particularly helpful for all types of anxiety, depression, OCD, and burnout, and supports clients in building psychological flexibility and living a more meaningful life. A typical session might include mindfulness exercises and values-based goal setting.

Compassion-Focused Therapy (CFT)

CFT was developed for individuals struggling with shame, self-criticism, and low self-worth, often seen in trauma survivors and perfectionists. It integrates evolutionary psychology, attachment theory, and neuroscience to help clients develop a kinder inner voice and cultivate feelings of safety. In practice, you might learn to engage your "compassionate self" through imagery, breathing exercises, and reflective practices to respond to harsh self-talk with warmth and understanding. CFT strengthens emotional regulation and helps reduce feelings of guilt and inadequacy.

Dialectical Behaviour Therapy (DBT)

DBT is designed for people who experience intense emotions and struggle with self-destructive behaviours, such as those diagnosed with borderline personality disorder (BPD), self-harm urges, or chronic suicidality. It combines cognitive and behavioural strategies with mindfulness and acceptance skills. Clients participate in individual therapy and group skills training, learning tools for emotion regulation, distress tolerance, interpersonal effectiveness, and mindfulness. For example, you might learn to "ride the wave" of an emotional crisis without engaging in harmful actions, fostering greater stability and resilience.

Trauma-Focused Cognitive Behavioural Therapy (TF-CBT)

TF-CBT is a specialist adaptation of CBT for trauma, including PTSD and complex childhood trauma. Therapy usually begins with stabilisation skills such as grounding and emotion regulation before moving into a trauma narrative phase, where you safely process and make sense of difficult memories. Finally, cognitive restructuring helps reframe trauma-related beliefs ("It was my fault"). TF-CBT supports you to regain a sense of safety, reduce distressing symptoms, and integrate your experiences in a compassionate, empowering way.

Eye Movement Desensitisation and Reprocessing (EMDR)

EMDR is an evidence-based approach for trauma and PTSD that involves bilateral stimulation (such as guided eye movements) to help the brain process traumatic memories. Rather than talking in detail, you focus on a distressing memory while following the therapist's prompts, reducing its emotional intensity. EMDR is also used for phobias and developmental trauma. A session might involve identifying core memories, processing them through eye movements, and installing more adaptive

beliefs ("I am safe now"). Many clients find EMDR effective when verbal processing feels overwhelming or stuck.

Mentalization-Based Treatment (MBT)

MBT helps people who struggle to understand their own or others' thoughts, feelings, and intentions—often individuals with BPD or relationship difficulties. The therapy aims to strengthen your "mentalizing" capacity: your ability to reflect on internal experiences and make sense of social interactions. In sessions, you might explore misunderstandings ("I thought my partner was ignoring me, but maybe they were overwhelmed themselves") and practice staying curious rather than jumping to conclusions. MBT can enhance emotional clarity, improve interpersonal relationships, and foster a more stable sense of self.

Interpersonal Psychotherapy (IPT)

IPT focuses on the connection between mood and interpersonal relationships. It is especially effective for depression, grief, and major life transitions. Therapy targets four key areas: unresolved grief, role disputes, role transitions, and interpersonal deficits. In practice, you might work on expressing emotions more openly, resolving conflicts with loved ones, or adjusting to new roles (like becoming a parent). IPT is typically time-limited and offers a structured, supportive space to strengthen social support and improve relationship dynamics.

Structured Clinical Management (SCM)

SCM is a flexible, team-based model used for individuals with complex emotional needs, including BPD and chronic crises. The approach provides a structured framework, practical goal-setting, and consistent support to reduce self-destructive behaviours and promote stability. In SCM, you might collaboratively develop a crisis plan, work on daily routines, and set personal goals (like improving sleep or reestablishing hobbies). This structured yet compassionate approach helps clients build a more predictable and supportive life.

Narrative Exposure Therapy (NET)

NET is designed for individuals who have experienced multiple or prolonged traumatic events, such as refugees or survivors of war and torture. The therapy involves creating a

detailed life narrative, integrating traumatic experiences into a coherent "lifeline." In sessions, you work through memories chronologically, processing both positive and traumatic experiences, and linking them into a meaningful personal story. NET helps reduce dissociation, increase narrative coherence, and support post-traumatic growth.

Narrative Therapy

Narrative therapy helps you separate yourself from problems and explore alternative stories about your identity and life experiences. Instead of internalising issues ("I am an anxious person"), you externalise them ("Anxiety is something that affects me, but it doesn't define me"). Therapy often includes mapping problem stories and identifying "unique outcomes" or moments that reflect your strengths and values. Narrative therapy is particularly helpful for trauma, identity exploration, and challenges rooted in cultural or systemic oppression, promoting empowerment and self-agency.

Counselling & Other Relational Therapies

Counselling and other relational therapies (such as psychodynamic or integrative approaches) focus on creating a safe, empathetic space to explore emotions, relationships, self-esteem, and life transitions. Rather than focusing on specific techniques or structured interventions, these approaches prioritise the therapeutic relationship as the main agent of change. You might explore grief, family patterns, self-identity, or long-held emotional wounds. This space allows you to process feelings at your own pace, gain deeper insight, and experience emotional healing through connection and understanding.

Psychodynamic Therapy

Psychodynamic therapy explores how early life experiences and unconscious processes shape your current feelings, behaviours, and relationships. It focuses on bringing hidden patterns and emotional conflicts into awareness to create lasting change. In sessions, you might explore repetitive relationship patterns, childhood memories, or feelings you find hard to express. Over time, you develop insight into why you feel or react the way you do, helping to break free from longstanding emotional difficulties. This approach can support issues like depression, anxiety, relationship challenges, and self-esteem concerns.

Psychoanalytic Therapy

Psychoanalytic therapy is a more intensive, long-term form of therapy rooted in Freudian theory. It aims to uncover deeply buried feelings and conflicts through free association, dream analysis, and exploring transference (how feelings toward important people in your past play out with your therapist). Sessions are frequent, often multiple times a week, allowing you to explore your inner world in depth. You might find yourself examining repetitive self-sabotaging patterns or unspoken fears. This therapy helps foster deep self-understanding and transformation, especially for complex or deeply rooted emotional struggles.

Cognitive Processing Therapy (CPT)

Cognitive Processing Therapy (CPT) is a structured, evidence-based approach specifically designed for PTSD and trauma-related difficulties. CPT focuses on helping you identify and challenge "stuck points" — unhelpful beliefs that keep you feeling stuck in trauma-related distress ("I should have done more to prevent it," or "I am permanently damaged"). In sessions, you work through worksheets and writing assignments to process traumatic experiences and reframe these thoughts. CPT empowers you to understand the impact of trauma on your beliefs about yourself, others, and the world, supporting you to regain a sense of safety, trust, and self-worth.

When Should You Seek Therapy?

You don't need to be in crisis to benefit from therapy. Therapy can help when you:

- Feel emotionally stuck or overwhelmed
- Struggle with shame, self-worth, or relationships
- Experience anxiety in any form, including:
 - Generalised anxiety disorder (GAD)
 - Panic attacks
 - Social anxiety
 - Health anxiety
 - Specific phobias
 - Obsessive worry
- Are recovering from trauma, loss, or major life changes

· Want to better understand yourself, heal, or grow

Inclusive and Neuroaffirming Practice

A good therapist will adapt therapy to respect your:

- Cultural background, identity, and faith
- Neurodivergent needs (e.g., ADHD, autism, sensory processing)
- LGBTQ+ identity
- Communication style and learning preferences

Therapy should feel safe, affirming, and welcoming.

? Frequently Asked Questions

Do I need a diagnosis?

No. Therapy is for anyone feeling stuck or wanting to change.

Which therapy is best for me?

Your therapist will help explore options based on your goals, values, and experiences.

Can therapy be adapted if I'm neurodivergent?

Yes. Neuroaffirming therapists tailor approaches to your processing style and strengths.

Is therapy confidential?

Yes, with limits for safety (e.g., risk of serious harm to yourself or others).

How long does it take?

Varies — some therapies are short-term (6–20 sessions), others longer for complex issues.

Do I have to talk about my past?

Not always. Some therapies focus on the present. You decide what to share and when.

Is online therapy effective?

Yes. Many find it just as effective as in-person, and it can be more flexible and comfortable.

Can I stop therapy at any time?

Yes. Therapy is always your choice. You can pause, stop, or change direction whenever you need.

Will therapy change who I am?

Therapy doesn't change who you are — it helps you reconnect with your authentic self and live more in line with your values.

Can I bring up different issues over time?

Absolutely. You might start with one focus and explore new topics as therapy progresses.

What if I don't "click" with my therapist?

The therapeutic relationship is key. If it doesn't feel like a good fit, you can discuss this openly or try working with someone else.

What if I've tried therapy before and it didn't help?

That's okay. Different approaches and different therapists can make a big difference. You deserve to find what works for you.

Will I have "homework" or things to practice between sessions?

In many therapies (like CBT or ACT), yes. These exercises help you apply what you're learning to real life and deepen progress.

Can therapy help with physical symptoms related to stress?

Yes. Therapy can support you in understanding and managing physical symptoms linked to anxiety, trauma, and chronic stress (like headaches, fatigue, gut issues).

How do I know when I'm ready to end therapy?

This is something you and your therapist decide together. Signs might include feeling more confident, coping better, and noticing improvements in relationships or daily life.

Tinal Words

Starting therapy can feel daunting — but it can also be the beginning of deep, meaningful change.

Evidence-based therapies and supportive counselling approaches offer practical, compassionate tools to help you heal, grow, and reconnect with yourself.

References

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