OXFORD PSYCHIATRY GROUP
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PSYCHOLOGICAL THERAPY

CBT, DBT and EMDR

What each therapy is for, how treatment is planned, and how to access it through the National Health Service or Oxford Psychiatry Group.

The purpose of this leaflet

This leaflet helps you compare three structured psychological therapies. The right choice depends on a careful assessment of your main problem, safety, preferences, previous treatment and goals. A therapy name alone is not a treatment plan, and none of these approaches is right for every difficulty.

Cognitive behavioural therapy (CBT): what it does

CBT looks at links between thoughts, feelings, physical reactions and behaviour. It uses an agreed formulation, practical exercises and work between sessions. It can support anxiety disorders, depression, obsessive-compulsive disorder and post-traumatic stress disorder when the condition-specific CBT protocol is used. The aim is to reduce the patterns keeping the problem going and build skills you can continue to use. **NICE anxiety guidance** | **NICE depression guidance** | **NICE trauma guidance**

How many CBT sessions?

There is no single course length. National Institute for Health and Care Excellence (NICE) guidance recommends 12 to 15 weekly one-hour sessions for generalised anxiety disorder. Trauma-focused CBT for post-traumatic stress disorder is usually 8 to 12 sessions, with more where clinically indicated. Depression treatment varies by severity, treatment type and progress. Your clinician should explain the proposed number, review progress and agree any change. **NICE CG113** | **NICE NG116**

Aim: a shared formulation, measurable goals, practice between sessions and a relapse-prevention plan.

Before starting CBT

Ask which problem the treatment is targeting, whether the therapist is trained in that protocol, how outcomes will be measured and what will happen if it is not helping. CBT should be adapted for communication, sensory, attention, memory, physical-health or cultural needs without losing the active ingredients of treatment. **BABCP register** | **HCPC register**

STRUCTURED THERAPIES

DBT and EMDR

These treatments have specific indications. Assessment should come before booking a course.

Dialectical behaviour therapy (DBT): what it does

Comprehensive DBT combines individual therapy, skills training, support between sessions and a clinician consultation team. It teaches mindfulness, distress tolerance, emotion regulation and relationship skills. NICE specifically says to consider comprehensive DBT for women with borderline personality disorder when reducing recurrent self-harm is a priority. DBT-informed skills may help other people, but they are not the same as a full DBT programme. **NICE CG78**

How many DBT sessions?

NICE does not set one universal number of sessions. A comprehensive programme is commonly organised over about 12 months, but local programmes differ and may have eligibility criteria. The purpose, components, frequency, crisis arrangements and review points should be written into the plan. A short skills course should not be described as comprehensive DBT. **NICE CG78**

Aim: reduce life-threatening and therapy-interfering behaviours, improve daily functioning and build a life worth living.

Eye movement desensitisation and reprocessing (EMDR)

EMDR is a structured trauma-focused therapy. It asks you to recall aspects of a traumatic memory while using bilateral stimulation, such as guided eye movements. NICE recommends EMDR for adults with post-traumatic stress disorder in specified circumstances. It is not a general treatment for every upsetting experience, and assessment should consider stability, risk, dissociation, substance use and readiness for trauma work. **NICE NG116**

How many EMDR sessions?

For adults, NICE says EMDR should usually be provided over 8 to 12 sessions, with more where clinically indicated, especially after multiple traumas. It should be delivered by a trained practitioner using a validated manual, with psychoeducation, management of distress and safety planning. Preparation and review are part of treatment; progress should not be judged by eye movements alone. **NICE NG116** | **EMDR Association UK**

Aim: reduce post-traumatic stress symptoms and the current distress linked to traumatic memories.

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ACCESS AND CHOICE

How to arrange treatment

Ask for a clear clinical rationale, agreed goals and a review plan whichever route you use.

Access through the National Health Service (NHS)

Adults in England can usually self-refer to NHS Talking Therapies for anxiety and depression; some areas accept people from age 16. Services assess the problem and offer treatments available locally, including CBT and, for post-traumatic stress disorder, trauma-focused CBT or EMDR. Comprehensive DBT is more often provided through a community mental health team or specialist personality-disorder service, usually following assessment or referral by a general practitioner (GP) or mental-health team. **Find NHS Talking Therapies** | **NHS urgent help**

Access through Oxford Psychiatry Group

Oxford Psychiatry Group can assess the main difficulty, consider risk and other diagnoses, and recommend a suitable psychological treatment. Where appropriate, we can discuss therapy with an Oxford Psychiatry Group clinician or advise on another suitable pathway. Availability, clinician fit, fees and likely course length should be confirmed before treatment begins. Existing patients should use the details in their clinical letter; new patients can enquire through our website. **Oxford Psychiatry Group**

Our webinars, blogs, tools and resources

Oxford Psychiatry Group publishes webinars, blogs and practical tools on its website. These can support understanding, preparation and practice between appointments. They are educational resources, not a diagnosis, crisis service or replacement for individual treatment. Choose material relevant to the goal agreed with your clinician and discuss anything that increases distress. **Visit our website**

Choosing a qualified practitioner

For CBT, check the British Association for Behavioural and Cognitive Psychotherapies (BABCP) register. Practitioner psychologists can be checked on the Health and Care Professions Council (HCPC) register. For EMDR, check relevant professional registration plus recognised EMDR training. For DBT, ask about the clinician's core profession, comprehensive DBT training, supervision and whether all programme components are provided. **BABCP** | **HCPC** | **EMDR Association UK**

If help is urgent

If you or someone else is in immediate danger, call 999 or go to accident and emergency (A&E). For urgent mental-health help that is not an immediate emergency, call NHS 111 and select the mental health option. Oxford Psychiatry Group, websites and support groups are not emergency services. **NHS urgent mental-health help** | **Samaritans**

Trusted sources used in this leaflet

Clinical guidance: **NICE CG113** | **NICE NG116** | **NICE CG78**

Access and registers: **NHS Talking Therapies** | **BABCP** | **HCPC**

This leaflet gives general information and does not replace an individual clinical, legal, educational or occupational assessment. Guidance and links were checked on 4 September 2026. External services and availability can change. Recommended course lengths are guideline-based examples, not guarantees; treatment must be personalised and reviewed.