

## Comparative Psychotherapy Process Scale (CPPS): Scoring Manual

### General Instructions:

The Comparative Psychotherapy Process Scale (CPPS) is an instrument designed to assess therapist activity, process and techniques used in a psychotherapy session. It is intended to be a predominantly *descriptive* measure (i.e., what is being done in the session), and to a lesser extent, an *evaluative* measure (i.e., how well it is being done). The rater's task is to search for evidence that a particular therapist action has occurred in the session. For each item, the rater asks, "Is the activity, behavior, or technique present or absent in the session?" In some instances, the rater may feel that limited inference is unavoidable, but the rater should avoid qualitative judgements such as whether a therapist's actions were "good" or "bad," effective or ineffective. The goal of the CPPS is to describe the session as accurately and objectively as possible.

Each item is rated on a scale from 0 (not at all characteristic) to 6 (extremely characteristic) and half point ratings are not permitted. Ratings of 2 or 4 indicate a behavior or activity that is "somewhat characteristic" or "characteristic" of the session, respectively. It is expected that items will receive low ratings (0) if the behavior or action is not present. In order to receive scores greater than 0, the behavior or action must occur at least once. High ratings (6) should also be used, as they are not reserved for the perfect therapeutic performance. High rating should not take on a magical quality, to be reserved for only those who perform treatment perfectly. The item descriptions below are intended to assist the rater in making reliable delineations between rating choices. In general, the ratings of each item will follow a similar format. Scores of 1 or 2 suggest some attempt on the part of the therapist to engage in the particular item's behavior or action with limited or no follow up. Ratings of 4 indicate that the behavior or action is addressed on separate occasions with some follow up exploration. It is important to note that for several items it is possible to get a score of 4 on this item, based on the therapist's efforts, even if the patient does not engage in this exploration. Scores of 5 or 6 suggest continued efforts by the therapist to exhibit the behavior or action indicated by the item with sustained follow up. The rater of the CPPS should make decisions based on the individual item guidelines provided below. While the scale may be used for an *atheoretical* evaluation of psychotherapy process, it should be noted that the CPPS items are derived from empirical studies comparing/contrasting Psychodynamic-Interpersonal and Cognitive-Behavioral approaches to treatment.

### Scoring:

Psychodynamic-Interpersonal (PI) Items: 1, 4, 5, 7, 8, 10, 13, 14, 16, 19  
Cognitive-Behavioral (CB) Items: 2, 3, 6, 9, 11, 12, 15, 17, 18, 20

To calculate the total score for the Psychodynamic-Interpersonal subscale, add the scores for all of the PI items. There are no reverse scored items. Divide total score by 10 to calculate a mean score on the original 0-6 metric in order to facilitate interpretation.

To calculate the total score for the Cognitive-Behavioral subscale, add the scores for all of the CB items. There are no reverse scored items. Divide total score by 10 to calculate a mean score on the original 0-6 metric in order to facilitate interpretation.

### Item Descriptions:

1. *The therapist encourages the exploration of feelings regarded by the patient as uncomfortable (e.g., anger, envy, excitement, sadness, or happiness).* If the therapist makes no queries into the patient's uncomfortable feelings, score a 0 on this item. A rating of 2 should be given if the therapist is limited, tentative, or unclear in his or her attempts to elicit discussion and exploration of the patient's uncomfortable feelings. If the therapist encourages the patient to explore his or her difficult feelings on different occasions and initiates some exploration and follow up of this discussion, score a 4 for this item. It is important to note that it is

possible for the therapist to receive a score of 4 even if the patient did not examine his or her difficult feelings if the therapist makes clear efforts to facilitate the exploration of those uncomfortable feelings. Higher scores of 5 or 6 are warranted if the therapist makes continual efforts to engage the patient in a discussion of his or her uncomfortable feelings and demonstrates sustained and in depth follow up of these topics.

2. ***The therapist gives explicit advice or direct suggestions to the patient.*** If the therapist offers no advice or direct suggestions to the patient, score a 0 on this item. Scores of 1 or 2 should be given if the therapist tentatively advises or offers the patient a suggestion with limited or no follow up and elaboration. If the therapist offers some direct suggestions or explicit advice for the patient to pursue with some follow up exploration, a rating of 4 should be given. Ratings of 5 or 6 should be reserved for therapists who develop specific strategies with the patient for solving or coping with a problem and review these strategies extensively.

3. ***The therapist actively initiates the topics of discussion and therapeutic activities.*** If the patient predominately supplies the topics of discussion and the focus of the therapy hour, score a 0 on this item. If the therapist provides few of the topics of discussion or limited direction, a rating of 1 or 2 should be given. A rating of 4 reflects a session in which the therapist initiates many of the topics discussed during the therapy hour. High ratings of 5 or 6 suggest that the therapist initiates the focus and topics of discussion and/or conducts the session with a clear agenda for session activity.

4. ***The therapist links the patient's current feelings or perceptions to experiences of the past.*** A score of 0 should be given if the therapist makes no effort to connect the patient's present feelings or perceptions with his or her past experiences. Ratings of 1 or 2 should be awarded if the therapist makes limited attempts to identify patterns between the patient's current feelings and his or her past experiences. A rating of 4 reflects a session in which the therapist makes clear associations or links between the patient's present feelings and his or her past experiences and provides some follow up exploration of that connection. It is important to note that for this item it is possible to get a score of 4, based on the therapist's efforts, even if the patient does not engage in this exploration. High ratings of 5 or 6 suggest that the therapist consistently attempts to distinguish a pattern and encourages sustained follow up and in depth exploration.

5. ***The therapist focuses attention on similarities among the patient's relationships repeated over time, settings, or people.*** If the therapist makes no attempt to address similarities among the patient's past and present relationships, score a 0 on this item. Ratings of 1 or 2 indicated that the therapist makes tentative or limited attempts to explore general patterns in the patient's interactions. A score of 4 suggests that the therapist develops a specific formulation such as identifying a core conflictual relationship theme (e.g., a wish, a response from others, and a response from the self) or a cyclical maladaptive pattern (e.g., acts of self, expectations of others reactions, actions of others toward self, and acts of self toward self) of the patient with some follow up and elaboration. It is important to note that for this item it is possible to get a score of 4, based on the therapist's efforts, even if the patient does not engage in this exploration. A score of 6 on this item suggests that the therapist discusses a specific formulation of this issue such as the patient's core conflictual relationship theme or cyclical maladaptive pattern, with extensive follow up and in depth exploration of the topic.

6. ***The therapist focuses discussion on the patient's irrational or illogical belief systems.*** Score this item a 0 if the therapist and patient do not discuss irrational thoughts or beliefs systems. Scores of a 1 or 2 indicate that the session contains general, non-specific, or limited discussion of the patient's illogical or irrational beliefs about a relationship, experience, or person, with little or no exploration. A rating of 4 suggests that the therapist identifies or challenges the patient's irrational thoughts or illogical connections of past and present experiences with a specific formulation and some follow up exploration of the consequences these thoughts hold for the patient. One example of a specific focus on irrational thoughts and beliefs is Rational-Emotive Therapy's A-B-C Theory of emotional disturbance. In this framework, it is not the event, but rather the patient's attitudes and beliefs about the event, which cause his or her emotional distress. This framework begins with an activating experience (e.g., a break-up with a significant other) to which the patient attaches irrational thoughts and beliefs ("I really must be a worthless person" or "The world is so unfair"). It is these irrational thoughts and beliefs that then lead to an upsetting consequence for the patient (e.g., depression or hostility). A second example of a specific focus on illogical or dysfunctional thoughts in a session is Beck's Cognitive Theory of Depression (Beck, Rush, Shaw, & Emery, 1979). Here, the patient's negative, automatic, and dysfunctional thoughts about him or herself ("I am worthless") the world ("The world is so unfair, why should I even try"), or the future ("I will never succeed") are seen as the root of the patient's depressed mood. The therapist may directly challenge

the patient's illogical thoughts during the session in an attempt to get him or her to change his or her pattern of thinking. High scores of 5 or 6 suggest a therapy session that predominately focuses on a specific formulation of the patient's irrational thoughts and beliefs with extensive follow up and elaboration of the consequences these thoughts hold for the patient. Again, it is important to note that for this item it possible to get a score of 4, based on the therapists efforts, even if the patient does not engage in this exploration.

7. ***The therapist focuses discussion on the relationship between the therapist and patient.*** This discussion usually occurs in relation to key interpersonal themes being explored in the session. If there is no discussion of the patient-therapist relationship, score a 0 on this item. Ratings of 1 or 2 suggest that the patient or the therapist briefly discuss the therapeutic relationship/transactions with little or no follow up exploration. A rating of 4 indicates at least some discussion about the patient-therapist relationship/transactions, with some elaboration or follow up of the issue by the therapist. High scores of 5 or 6 suggest a session in which the therapist and client engage in sustained, in depth discussions of their relationship, with extensive follow up and exploration.

8. ***The therapist encourages the patient to experience and express feelings in the session.*** If the therapist does not encourage the exploration the patient's feelings during the session, score a 0 on this item. If the therapist makes tentative or brief explorations into the patient's feelings with limited follow up, score a 1 or 2 for this item. A score of 4 suggests that the therapist makes some attempts to engage the patient in a discussion of his or her feelings and attempts to elicit some further exploration and follow up of those feelings. It is important to note that for this item it possible to get a score of 4, based on the therapists efforts, even if the patient does not engage in this exploration. Higher ratings of 5 or 6 indicate that the therapist makes clear, consistent efforts to foster a discussion of the patient's affective experience and makes extensive and sustained attempts to follow up and elaborate on the patient's feelings.

9. ***The therapist suggests specific activities or tasks (e.g., homework) for the patient to attempt outside of session.*** If the therapist makes no mention of specific activities or explicit tasks for the patient to attempt outside of session, score this item a 0. Ratings of 1 or 2 indicate that the patient and therapist briefly discuss the idea of out of session activities, but the therapist does not proscribe or assign the activity. A rating of 4 indicates that the therapist specifically proscribes or assigns homework to the patient (e.g., books or handouts to read, keeping a diary, keeping a log of negative or irrational thoughts). Higher ratings of 5 or 6 reflect a session in which the therapist conducts an in depth and sustained review of the homework task or the completion of an assignment.

10. ***The therapist addresses the patient's avoidance of important topics and shifts in mood.*** Score this item a 0 if the therapist makes no effort to discuss a patient's avoidance of a topic, shift in mood, or other impediment to therapy. Ratings of 1 or 2 indicate that the therapist briefly mentions the patient's avoidance of an important topic or change in mood, moving the discussion back to the relevant material, but offers little or no follow up exploration of the avoidance. Score a 4 for this item if the therapist makes a clear reference to an obstacle or resistance hindering the progress of therapy with some follow up and elaboration of the impediment or if the therapist attempts to explore motives, feelings, or other meanings for the obstacle. A rating of 5 or 6 indicates that the avoidance or shift is discussed and understood, through sustained follow up and exploration. A rating of 4 may be made even if the patient is resistant to discussing the topic as long as the therapist attempts to explore or challenge the patient's difficulty in discussing the subject matter. For example, a therapist might state, "It seems to be hard for you to discuss X. What are your feelings about this type of discussion?"

11. ***The therapist explains the rationale behind his or her technique or approach to treatment.*** If the therapist offers no explanation of his or her rationale or approach to treatment, score a 0 on this item. If the therapist briefly or tentatively discusses his or her technique or approach to treatment, with limited elaboration, score a 1 or 2 on this item. A rating of 4 indicates that the therapist clearly and specifically explains the rationale behind his or her technique or approach with some follow up elaboration. A score of 5 or 6 suggests that the therapist gives an explicit and detailed account of his or her approach to treatment or rationale for the technique being implemented, with sustained and extensive follow up.

12. ***The therapist focuses discussion on the patient's future life situations.*** Score this item a 0 if none or very little of the session is focused on the patient's future. Ratings of 1 or 2 should be given if the session focuses somewhat or in a limited manner on future experiences and relationships. A score of 4 reflects a session that has consistent focus on the patient's future life situation, with some exploration of themes among

the patient's future actions, events, experiences, and relationships. Higher ratings of 5 or 6 suggest sustained discussions of the patient's future life situation, for a significant portion of the session, with extensive follow up and specific exploration of future actions.

13. ***The therapist suggests alternative ways to understand experiences or events not previously recognized by the patient.*** This item is designed to measure the extent to which the therapist encouraged the patient to explore or consider alternative ways of understanding an event, such as through interpretation and reframing. For example, a therapist might accomplish this by discussing the patient's motives, needs, or wishes surrounding an event or by interpreting or reframing a patient's reported experiences. Score a 0 for this item if the therapist does not offer the patient new, alternative ways to interpret, reframe, or understand his or her experiences. A score of 2 indicates that the therapist briefly, or in a limited manner, encourages the patient's discussion of his or her significant needs, motives, or wishes surrounding an event or experience, and provides limited exploration. A rating of 4 indicates that the therapist interprets or reframes a patient's experiences. Examples of this might be identifying a core conflictual relationship theme (i.e., identifying a wish, a response from others, and a response from the self) or cyclical maladaptive pattern (i.e., identifying acts of self, expectations of others reactions, actions of others toward self, and acts of self toward self) in order to provide an alternative understanding of his or her experiences and provides some follow up and exploration. It is important to note that for this item it is possible to get a score of 4, based on the therapist's efforts, even if the patient does not engage in this exploration. Higher scores of 5 or 6 indicate that the therapist interprets or reframes the patient's experiences and engages the patient in continued elaboration on the topic in order to facilitate a novel understanding of an event.

14. ***The therapist identifies recurrent patterns in patient's actions, feelings, and experiences.*** A rating of 0 indicates that the therapist makes no attempt to seek a pattern in the patient's actions, feelings, and experiences. Score a 2 on this item if the therapist makes limited or tentative attempts to identify patterns in these domains with limited follow up and exploration. A rating of 4 reflects a session in which the therapist actively and consistently pursues a common theme in the patient's general descriptions of actions, feelings, and experiences and exhibits some exploration and elaboration. It is important to note that for this item it is possible to get a score of 4, based on the therapist's efforts, even if the patient does not engage in this exploration. In order to receive high ratings of 5 or 6, the therapist must provide the patient with a sequencing of events in a linked or connected manner as well as encourage sustained exploration and elaboration of the recurrent pattern.

15. ***The therapist provides the patient with information and facts about his or her current symptoms, disorder, or treatment.*** If the therapist offers no explicit information to the patient about his or her symptoms, disorder, or treatment, score a 0 for this item. Brief, tentative, or vague discussions of these issues, with little or no follow up exploration, warrant a rating of 1 or 2. A rating of 4 suggests discussion of the patient's symptoms, criteria, disorder, or specific treatment protocol with some elaboration and follow up of the topic. High ratings of 5 or 6 suggest that the therapist provides the patient with extensive, specific, and highly detailed information about his or her symptoms, disorder, or nature of treatment, with continued follow up and elaboration of these topics.

16. ***The therapist allows the patient to initiate the discussion of significant issues, events, and experiences.*** A score of 0 on this item indicates that the therapist predominately initiates and sustains the topics of discussion or begins the session with a clear agenda for activity. A score of 1 or 2 on this item suggests that the patient occasionally originates the discussion of significant events and experiences with limited follow up elaboration. A score of 4 should be coded if the patient initiates much of the discussions during the therapy hour as well as explores and elaborates on them. High ratings of 5 or 6 reflect a session in which the patient initiates the majority of the discussions and provides extensive follow up and elaboration of the topics with only brief or very limited input from the therapist.

17. ***The therapist explicitly suggests that the patient practice behavior(s) learned in therapy between sessions.*** If the therapist makes no mention of practicing behaviors outside of the session, score a 0 for this item. Ratings of 1 or 2 indicate that the therapist and patient briefly discuss practicing behaviors learned by the patient during sessions, but the therapist does not proscribe, or assign the task to the patient. Score a 4 on this item if the therapist explicitly proscribes, assigns, or directs the patient to practice behaviors or skills learned during the therapy hour between sessions (e.g., relaxation techniques, positive self-talk, thought stopping, biofeedback). Higher ratings of 5 or 6 reflect a session in which the therapist conducts an in depth and sustained

review of behaviors or skills to be practice between sessions or has the patient practice the skill during the session.

18. ***The therapist teaches the patient specific techniques for coping with symptoms.*** If the therapist makes no mention of specific techniques for coping with symptoms, score a 0 for this item. Score a 1 or 2 on this item if the therapist and patient briefly discuss techniques or strategies for coping with his or her symptoms, but the therapist does not teach a specific behavior or skill. A score of 4 suggests that the therapist teaches a specific technique in order to help the patient cope with his or her symptoms (i.e., teaching relaxation, thought stopping, positive self-talk, or biofeedback techniques) and may include some limited practice of the behavior during the session. Higher ratings of 5 or 6 reflect a session in which the therapist conducts a detailed and sustained instruction of a specific coping method or has the patient practice the particular strategy or technique during the session.

19. ***The therapist encourages discussion of patient's wishes, fantasies, dreams, or early childhood memories (positive or negative).*** An example of a therapist encouraging the discussion of these issues may take the form of, "What do you imagine would happen if you did X?", "How do you wish this person would have reacted when you said Y?", or "What did you hope would happen when you did Z?" If the therapist did not encourage the patient to explore wishes, fantasies, dreams, or early childhood memories, score a 0 for this item. Ratings of 1 or 2 suggest that the therapist makes brief or limited approaches to the patient's wishes, fantasies, dreams, or early childhood memories, and elicits little or no follow up elaboration. Score a 4 for this item if the therapist encourages the discussion of these issues and does some follow up exploration as to the personal meaning of the issue for the patient. It is important to note that for this item it possible to get a score of 4, based on the therapists efforts, even if the patient does not engage in this exploration. Scores of 5 or 6 indicate that the patient's wishes, desires, fantasies, dreams, or early childhood memories are discussed thoroughly, with extensive follow up exploration of the topic.

20. ***The therapist interacts with the patient in a teacher-like (didactic) manner.*** If there was no evidence of the therapist behaving in a teacher-like manner, score a 0 for this item. Score this item a 2 if the therapist briefly interacts with the patient in a teacher-like didactic manner. A score of 4 is indicative of a session in which the therapist engages in a didactic, teacher-like relationship with the patient, educating him or her on a given topic or issue. A score of 5 or 6 reflects a patient-therapist interaction that is predominately didactic and teacher-like, where the primary focus of the session is for the therapist to teach and educate the patient.

CPPS-Form ER/T

Therapist \_\_\_\_\_  
Patient ID \_\_\_\_\_

Session # \_\_\_\_\_  
Rater \_\_\_\_\_

**Instructions:** Using the scale provided below, please rate how characteristic each statement was of the therapy session. For each item, please write the scale rating number on the blank line provided.

**Scale:**

0	1	2	3	4	5	6
Not at all Characteristic		Somewhat Characteristic		Characteristic		Extremely Characteristic

- (1) The therapist encourages the exploration of feelings regarded by the patient as uncomfortable (e.g. anger, envy, excitement, sadness, or happiness). \_\_\_\_\_
- (2) The therapist gives explicit advice or direct suggestions to the patient. \_\_\_\_\_
- (3) The therapist actively initiates the topics of discussion and therapeutic activities. \_\_\_\_\_
- (4) The therapist links the patient's current feelings or perceptions to experiences of the past. \_\_\_\_\_
- (5) The therapist focuses attention on similarities among the patient's relationships repeated over time, settings, or people. \_\_\_\_\_
- (6) The therapist focuses discussion on the patient's irrational or illogical belief systems. \_\_\_\_\_
- (7) The therapist focuses discussion on the relationship between the therapist and patient. \_\_\_\_\_
- (8) The therapist encourages the patient to experience and express feelings in the session. \_\_\_\_\_
- (9) The therapist suggests specific activities or tasks (homework) for the patient to attempt outside of session. \_\_\_\_\_
- (10) The therapist addresses the patient's avoidance of important topics and shifts in mood. \_\_\_\_\_
- (11) The therapist explains the rationale behind his or her technique or approach to treatment. \_\_\_\_\_
- (12) The therapist focuses discussion on the patient's future life situations. \_\_\_\_\_
- (13) The therapist suggests alternative ways to understand experiences or events not previously recognized by the patient. \_\_\_\_\_
- (14) The therapist identifies recurrent patterns in patient's actions, feelings and experiences. \_\_\_\_\_
- (15) The therapist provides the patient with information and facts about his or her current symptoms, disorder, or treatment. \_\_\_\_\_
- (16) The therapist allows the patient to initiate the discussion of significant issues, events, and experiences. \_\_\_\_\_
- (17) The therapist explicitly suggests that the patient practice behavior(s) learned in therapy between sessions. \_\_\_\_\_
- (18) The therapist teaches the patient specific techniques for coping with symptoms. \_\_\_\_\_
- (19) The therapist encourages discussion of patient's wishes, fantasies, dreams, or early childhood memories (positive or negative). \_\_\_\_\_
- (20) The therapist interacts with the patient in a teacher-like (didactic) manner. \_\_\_\_\_

CPPS-Form P

Therapist \_\_\_\_\_  
Patient ID \_\_\_\_\_

Session # \_\_\_\_\_  
Rater \_\_\_\_\_

**Instructions:** Using the scale provided below, please rate how characteristic each statement was of the therapy session. For each item, please write the scale rating number on the blank line provided.

**Scale:**

0	1	2	3	4	5	6
Not at all Characteristic		Somewhat Characteristic		Characteristic		Extremely Characteristic

- (1) My therapist encouraged me to explore feelings that are hard for me to talk about (e.g. anger, envy, excitement, sadness, or happiness). \_\_\_\_\_
- (2) My therapist gave me explicit advice or direct suggestions for solving my problems. \_\_\_\_\_
- (3) My therapist actively initiated the topics of discussion and activities during the session. \_\_\_\_\_
- (4) My therapist linked my current feelings or perceptions to experiences in my past. \_\_\_\_\_
- (5) My therapist brought to my attention similarities between my past and present relationships. \_\_\_\_\_
- (6) Our discussion centered on irrational or illogical belief systems. \_\_\_\_\_
- (7) The relationship between the therapist and myself was a focus of discussion. \_\_\_\_\_
- (8) My therapist encouraged me to experience and express feelings in the session. \_\_\_\_\_
- (9) My therapist suggested specific activities or tasks (homework) for me to attempt outside of the session. \_\_\_\_\_
- (10) My therapist addressed my avoidance of important topics and shifts in my mood. \_\_\_\_\_
- (11) My therapist explained the rationale behind his or her technique or approach to treatment. \_\_\_\_\_
- (12) The focus of our session was primarily on future life situations. \_\_\_\_\_
- (13) My therapist suggested alternative ways to understand experiences or events I had not previously recognized. \_\_\_\_\_
- (14) My therapist identified recurrent patterns in my actions, feelings and experiences. \_\_\_\_\_
- (15) My therapist provided me with information and facts about my current symptoms, disorder, or treatment. \_\_\_\_\_
- (16) I initiated the discussion of significant issues, events, and experiences. \_\_\_\_\_
- (17) My therapist explicitly suggested that I practice behavior(s) learned in therapy between sessions. \_\_\_\_\_
- (18) My therapist taught me specific techniques for coping with my symptoms. \_\_\_\_\_
- (19) My therapist encouraged discussion of wishes, fantasies, dreams, or early childhood memories (positive or negative). \_\_\_\_\_
- (20) My therapist interacted with me in a teacher-like (didactic) manner. \_\_\_\_\_