

**AB-CAT: Questionnaire about your experiences of
Cognitive Analytic Therapy (CAT)**

Firstly we would like to introduce ourselves: We are Dr Phyllis Annesley, Consultant Clinical Psychologist and CAT Psychotherapist from the National High Secure Healthcare Service for Women and Dr Alex Barrow, Clinical Psychologist and CAT Practitioner from the Low Secure and Community Forensic Service at the Wells Road Centre, Nottingham.

We would like to learn more about what people thought about having CAT therapy. Together we have written the questionnaire in the next few pages to find out about people's views about CAT therapy. We hope this will help us to keep improving the therapies we offer people.

We would like to look at and understand the feedback we receive and share this with others. After we have done this we would like to write up the results in professional journals so others can read about what we find out.

If you fill out the questionnaire you don't have to give us your name. If we use your comments when we write up our findings we will make sure that it is not possible to identify you.

If you **do not** wish for your specific feedback to be published then please tick this box ☐

Thank you for taking the time to consider our request. If you do choose to complete the questionnaire, then please return it to your CAT therapist, who will send it back to us.

Name and address of CAT therapist:**Some information about your CAT therapy**

Firstly, could you please provide us with some information about your CAT Therapy?

How many sessions did you have? _____

Which service did your therapy take place at? _____

If you have had *more than one CAT therapy* then we would be grateful if you would consider filling out a separate questionnaire for each. If not, then please complete the questionnaire for the *most recent CAT therapy* you have completed.

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1. Please describe your overall experience of having CAT in the box below:

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2. How satisfied were you overall with your CAT therapy? Please tick one box.

Extremely	Very much	Quite	Somewhat	A little bit	Not at all

**3a. How satisfied were you with the length of your CAT therapy?
Please tick one box.**

Extremely	Very much	Quite	Somewhat	A little	Not at all

3b. What, if anything, would you like to have changed about the length of your CAT therapy?

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4. For each item, please tick the box which best describes your experience of CAT:

	Extremely	Very much	Quite a lot	Somewhat	A little	Not at all
a. How much did you feel you and your therapist worked together to help you?						
b. How much did you feel you were able to trust your therapist?						
c. How much did you feel supported by your therapist?						
d. How much did you feel challenged by your therapist?						
e. How much did you feel safe within the therapy?						
f. How much did you talk about patterns from your life generally also being present between you and your therapist? <i>For example, if you are someone who likes to please others, you may have also wanted to please your therapist and you and your therapist may have spoken about this.</i>						

5. How **helpful** were each of the following parts of your CAT therapy?

	Extremely	Very much	Quite	Somewhat	A little	Not at all
a. Psychotherapy File (questionnaire you completed at the start of therapy)						
b. Reformulation letter from your therapist						
c. Diagram or 'CAT map'						
d. Weekly rating sheets						
e. Homework or tasks between sessions						
f. Goodbye letter from therapist						
g. Goodbye letter you wrote to your therapist						

6. How **understandable** were each of the following parts of your CAT therapy?

	Extremely	Very much	Quite	Somewhat	A little	Not at all
a. Psychotherapy File (questionnaire you completed at the start of therapy)						
b. Reformulation letter from your therapist						
c. Diagram or 'CAT map'						
d. Weekly rating sheets						
e. Homework or tasks between sessions						
f. Goodbye letter from therapist						

Please turn over...

7. How much did your CAT therapy help you with the following? Please tick one box for each.						
	Extremely	Very much	Quite a lot	Somewhat	A little bit	Not at all
a. Understanding yourself more?						
b. Getting on with other people better?						
c. Achieving the goals you set at the beginning of your therapy?						
d. Coming up with ideas for things you can do differently (like learning new coping skills)						
e. Practicing the changes ('exits') in real life						
f. Taking better care of yourself						
g. Keeping yourself and others safe						
h. Managing coping with the ending of therapy						

8. How likely would you be to recommend CAT to a friend or someone you are close to with similar difficulties? Please tick one box.					
Extremely	Very much	Quite	Somewhat	A little	Not at all

9a. Was there anything about CAT that you didn't expect?
9b. Was there anything about CAT that you think people starting CAT therapy should know?

10. Are there any other comments you would like to make about your CAT therapy?

We very much appreciate you taking the time to complete this questionnaire. Thank you for taking part and your comments. Please now return this questionnaire to your CAT therapist.