



**vita**  
health group

## What is OCD?

Name:

Date:



**Obsessive Compulsive Disorder** (OCD) can be different for everyone but, people with OCD often experience **Obsessions** – these are thoughts, pictures or impulses. These usually come into our mind when we don't want them and can be unpleasant. These obsessions can leave the person feeling very anxious, uncomfortable or frightened.

**Compulsions** are the thoughts or behaviour performed in order to put right the obsession. Sometimes the behaviour performed can be irrational, for example counting up in 5's, and the OCD sufferer recognises this. Sometimes the behaviour performed is more closely related to the obsession, such as washing hands when the obsession is around cleanliness.

Most people with OCD feel unable to control their thoughts or change their behaviours.



# What is OCD?

Although many people experience minor obsessions (such as worrying about leaving the gas on, or if the door is locked) and compulsions (such as avoiding the cracks in the pavement), these don't significantly interfere with daily life, or are short-lived.

Everybody has intrusive thoughts, images, or memories. Intrusive thoughts are ones we did not choose to have, and they 'intrude' into our conscious mind. When we are confronted by painful thoughts or memories it is natural to want to push them away. Unfortunately, human brains are not very good at **not thinking** of something.

You can do a behavioural experiment to try this for yourself. Follow these instructions and notice what happens:

**For the next 60 seconds, try as hard as you can not to think of a white bear. Use all your mental strength. Count how many times you think of a white bear.**

What did you notice? You will probably find that it's quite difficult. Psychologists have discovered that the more we try to not think of something, the more we end up thinking about it: we have intrusive unwanted thoughts about the thought we are trying to suppress.

If you experience OCD, it's likely that your obsessions and compulsions will have a big impact on how you live your life.

What we know about OCD is that the condition affects as many as **12 in every 1,000 people** (1.2% of the population) from young children to adults, regardless of gender, social or cultural background. **OCD UK**

## What's it like to live with OCD?



"It's not about being tidy, it's about having no control over your negative thoughts. It's about being afraid not doing things a certain way will cause harm."

"I knew it was irrational... but tapping certain objects would ease the effect of the terrible intrusive thoughts. It would be time consuming but at least then I could feel like I wasn't a bad person."

**MIND**



# What is OCD like for you?

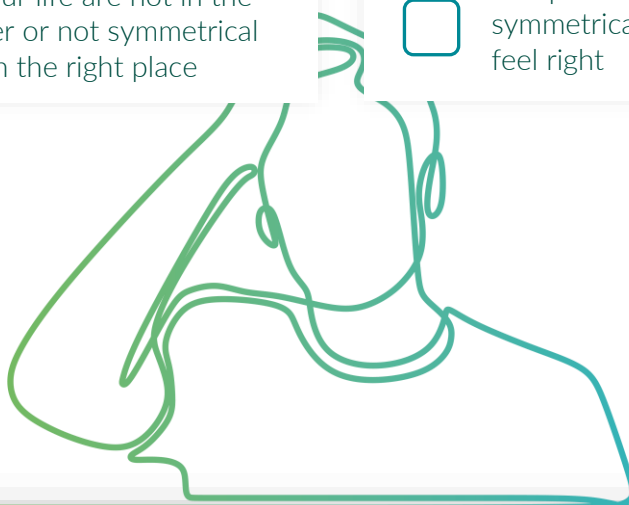
Common obsessions and compulsions – tick those that you relate to:

## What we think - Obsessions

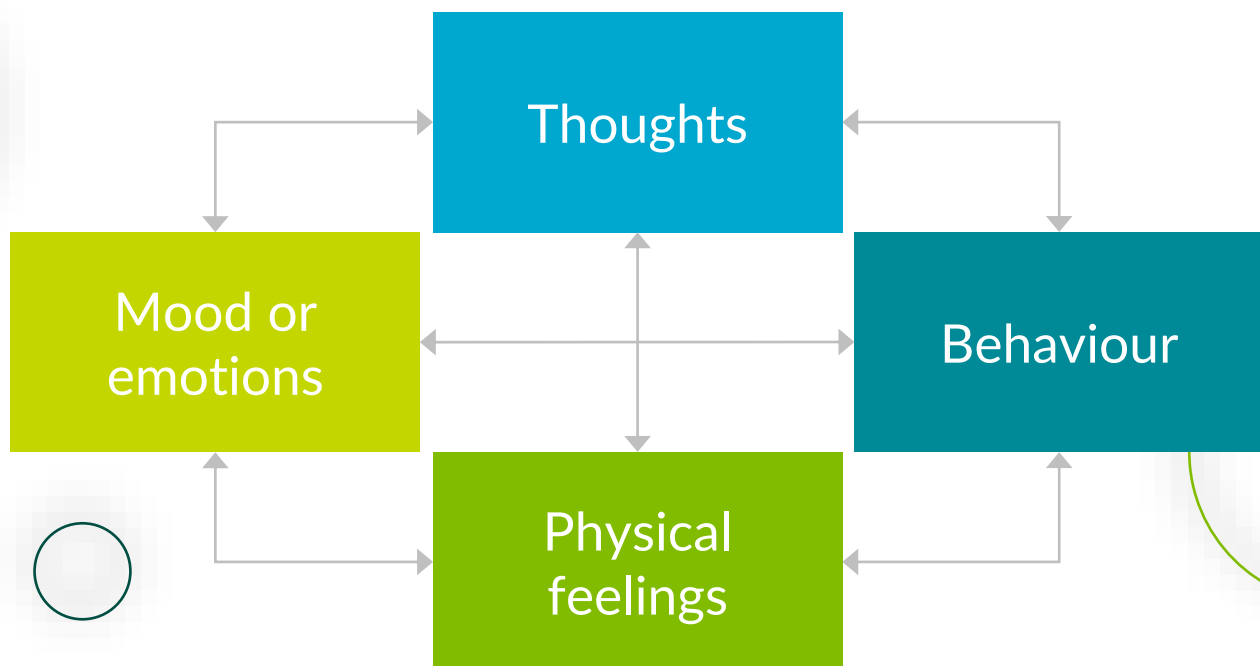
- Fearful thoughts or images about being contaminated by dangerous substances
- Thoughts/images that some serious harmful events will occur because of your carelessness
- Unwanted thoughts of a violent or sexual nature that you find repulsive or frightening
- Pictures or words in your head that suggest you will harm or have harmed others
- Pictures come into your mind of your loved ones dead
- Things in your life are not in the correct order or not symmetrical enough or in the right place

## What we do - Compulsions





- Checking body for signs of contamination, wash/disinfect frequently
- Checked feared situations/appliances or journey routes, avoid responsibility
- Avoid going out alone, confess thoughts and seek reassurance
- Avoid situations which you feel put you at risk of harming others e.g. hide kitchen knives
- Carry out tasks that will 'neutralise' the thoughts e.g. counting, seeking reassurance from others
- You put things right or make them symmetrical many times until they feel right



# The Cognitive Behavioural Model (CBT)



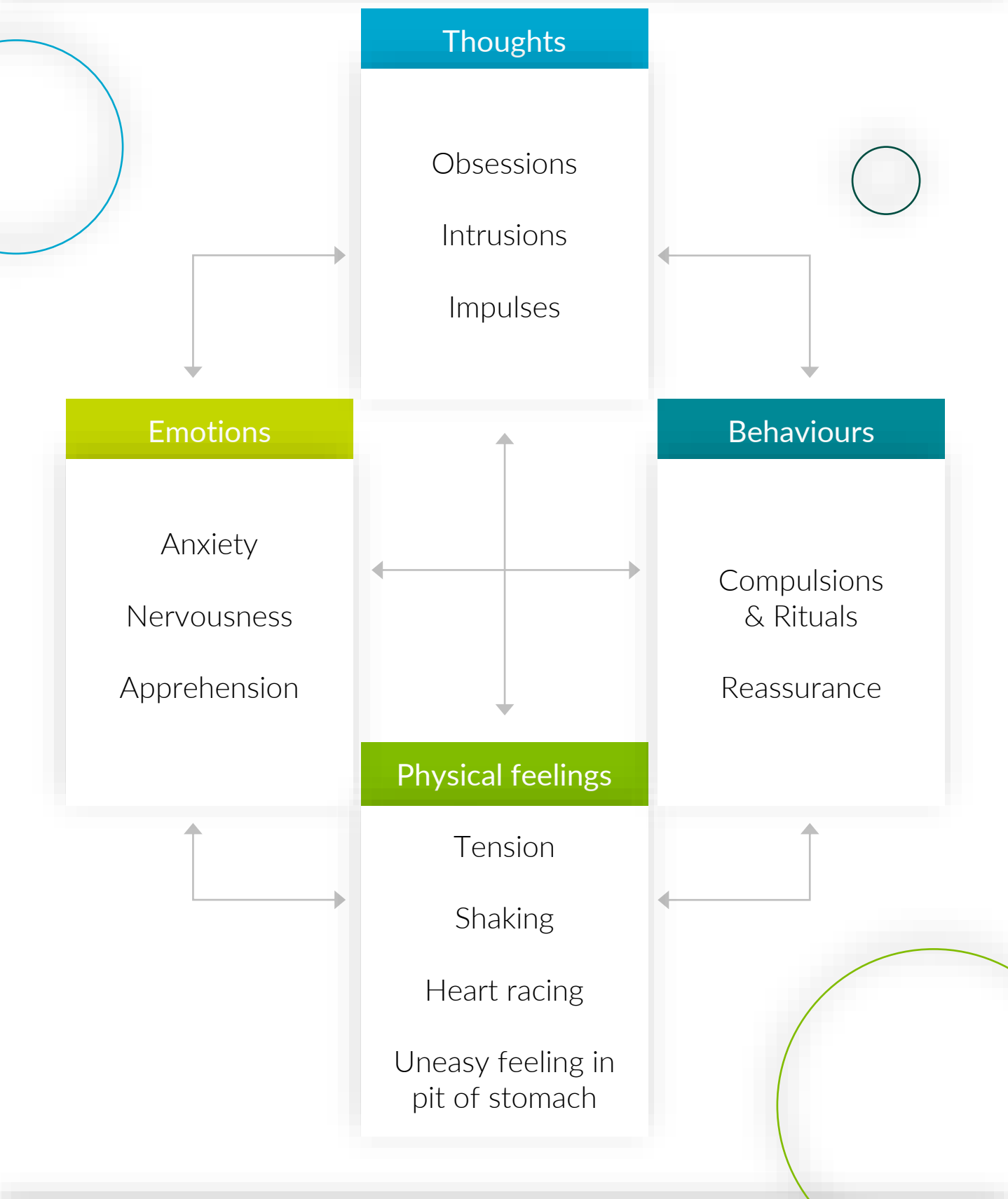
Cognitive behavioural therapy (CBT) focuses on present maintenance cycles to understand our difficulties. CBT looks at what physical symptoms, behaviours, thoughts and emotions we experience, and how each of these areas impact each other:

-  **Thoughts** are often negative and exaggerated (e.g. worst case scenario, self critical)
-  **Behaviours** are our attempts to cope with a situation (e.g. avoidance)
-  **Physical sensations** are how our body reacts to our problem (e.g. tension, tiredness)
-  **Mood or emotions** are how we feel (e.g. low, angry, scared, or embarrassed)

When we understand this, we can see that by changing one of these to be more helpful or positive, the others will change too. CBT uses evidence-based techniques to help us make positive changes to break out of these cycles and improve our wellbeing.

Throughout your sessions, we will help to introduce specific tools and techniques which you can use to help manage your mood and anxiety. You will be expected to practise these techniques and review these each week. This will enable you to become your own therapist.

# Vicious Cycle of OCD



# Your Vicious Cycle

