

CHAPTER 8

Challenging Your Faulty Beliefs: Cognitive Restructuring

When I look back on all these worries, I remember the story of the old man who said on his deathbed that he had had a lot of trouble in his life, most of which had never happened.

—Sir Winston Churchill

Although the structure and biological functioning of the brain has been an important focus for scientists studying OCD, there has also been considerable interest in the role patterns of thinking play in people with OCD. Scientists have concluded that faulty beliefs about the risks of danger and harm play an important part in the fear, anxiety, and dread suffered by people with OCD (Salkovskis 1985; Freeston, Rheume, and Ladouceur 1996). You can also think of these faulty beliefs as inaccurate appraisals or interpretations.

Imagine walking through a densely wooded forest with some friends. It's a beautiful day, and you're enjoying the sights and sounds all around you. You're relaxed and calm as you enjoy the sounds of birds and wildlife. Suddenly, a friend tells you he thinks he just saw a poisonous snake.

An image of the snake slithering through the grass and attacking you triggers your body to prepare for danger. You become edgy, fearful, and anxious. Your heart pounds, your muscles tighten, and your pace speeds up as you think of the fastest way to leave the forest. Slight movements of the bushes and the

sounds of rustling tree leaves—phenomena that you ignored or found pleasing just moments ago—now cause you to feel fear. You won't relax until you exit the forest safely.

When you finally leave the forest unharmed, you breathe a sigh of relief. Although you never actually saw a snake, your brain didn't care. Your anxious reaction was solely in response to your appraisal of the situation: your belief about the presence of a snake. Whether there was actually a snake nearby didn't matter. Such is the power of a belief to trigger powerful bodily sensations and reactions.

People with OCD possess strong beliefs about the likelihood of a given situation being dangerous to themselves or others. Often these beliefs can't be supported or justified by the facts, and in fact, there's evidence to contradict the belief. This makes the belief a faulty one. Most faulty beliefs arise from certain categories of cognitive errors. Here are some typical cognitive errors of people with OCD, with examples of the faulty beliefs arising from each.

Overestimating Risk, Harm, and Danger

- I must protect myself (or others or loved ones), even if there is only the remotest chance of something bad happening. I'd rather be safe than sorry. I'll presume the situation is dangerous until it can be proven safe.

Overcontrol and Perfectionism

- I must maintain absolute control over my thoughts, feelings, and actions, as well as all the circumstances in my life.
- Unless I do everything perfectly, it's intolerable to me.
- Extreme harm and danger can come to me, my loved ones, or innocent others if I don't protect them perfectly.
- If it doesn't look or feel just right, it's intolerable.

Catastrophizing

- An open sore on my arm means I'll definitely get AIDS if I'm around someone I think has AIDS.
- If I get into arguments with my mother, it must mean I'm definitely a violent person.

Black-and-White or All-or-Nothing Thinking

- If I'm not perfectly safe, then I'm in great, overwhelming danger. A tiny, one-in-a-million chance of something bad happening is exactly the same as a huge, 99.999 percent chance.
- If I don't do it perfectly, then I've done it horribly.
- If I don't perfectly protect others from harm, I'll be severely punished.
- If I don't perfectly understand everything I read, I feel as if I don't understand anything I've read.

Persistent Doubting

Even though it makes no sense and it's not justified by the facts, maybe I...

- Wasn't careful enough, and something bad will happen as a result
- Harmed (molested, injured, cheated) someone
- Stole (plagiarized, did something awful, improper, immoral, bad)

Magical Thinking

- Thoughts are very powerful. Merely thinking a bad, horrible thought will definitely cause something horrible to happen.

Thought-Action Fusion

- If I have a bad or horrible thought about harming someone, it feels just as if I've actually done it.
- If I think about something bad happening, I'm implicitly responsible should it actually happen.

Overvaluing Thoughts

- If I have a bad thought, it means I'm bad, dangerous, or crazy.
- My thoughts are the true indicator of who I am and what I'm likely to do.
- I'm judged as much for the nature and quality of my thoughts as for what I actually do.

Superstitious Thinking

- By doing my ritual (washing, tapping, repeating, touching, spinning, and so on), I can ward off bad things from happening to me and protect those I love.
- There are bad numbers and good numbers. Bad numbers cause bad things to happen, and good numbers cause good things to happen or can stop bad things from happening.

Intolerance of Uncertainty

- I must be 100 percent certain of everything, and I must be 100 percent sure that everything will be alright. If I'm the slightest bit uncertain about anything (my future, my health, or loved ones' health), it is intolerable and I must do something, anything, to be certain that everything will be alright.

Overresponsibility

- Maybe I caused something bad to happen. My failure to prevent it must mean that I'm definitely a bad person.

- I must always, at all times, guard against making a mistake that can possibly harm an innocent person, no matter how remote the possibility.

Pessimistic Bias

- If something bad is going to happen, it is much more likely to happen to me or someone I love or care about than to others. This occurs for no reason other than because it's me.

What-If Thinking

In the future, what if I...

- Do it wrong?
- Get AIDS?
- Am responsible for injuring someone?

Intolerance of Anxiety

- Anxiety is dangerous to me and I can't tolerate being anxious for even a short period of time. I'll do anything to feel better now.

Emotional Reasoning

- I must be in great danger, otherwise I wouldn't be feeling so anxious.
- It doesn't feel just right, so something must be terribly wrong.

Extraordinary Cause and Effect

- Objects have the ability to defy the forces of nature; for example, stoves can spontaneously turn on, refrigerators can open, locks can unlock—all without human intervention.
- Germs and viruses can leap long distances—even across city streets—and thus contaminate me and others.

THE ABCDS OF FAULTY BELIEFS

The role of faulty beliefs in maintaining OCD symptoms can be understood using the ABCD method. It's based on the original ABC method of cognitive therapy developed by Albert Ellis (1962) and Aaron Beck, Gary Emery, and Ruth Greenberg (1985), in which A stands for *activating event*, B stands for faulty *beliefs* about, or appraisals of, the event, and C stands for the emotional *consequences*—anxiety, doubt, and worry. In this adaptation for people with OCD, D stands for a neutralizing ritual or compulsion. The anxiety, emotional discomfort, and resulting compulsive behaviors of OCD take place in the following sequence:

A = Activating Event and Intrusive Thought, Image, or Urge

An event, such as touching a doorknob or turning off the stove or a light switch, generates an intrusive thought. Here are some examples:

- What if I didn't really lock the door and an intruder destroys my home?
- What if the stove is on and my house burns down and I'm at fault?
- What if this thought about causing danger or harm means that I'm dangerous, crazy, or perverted or that something horrible will happen to me or those I love?

B = Faulty Belief About the Intrusive Thought

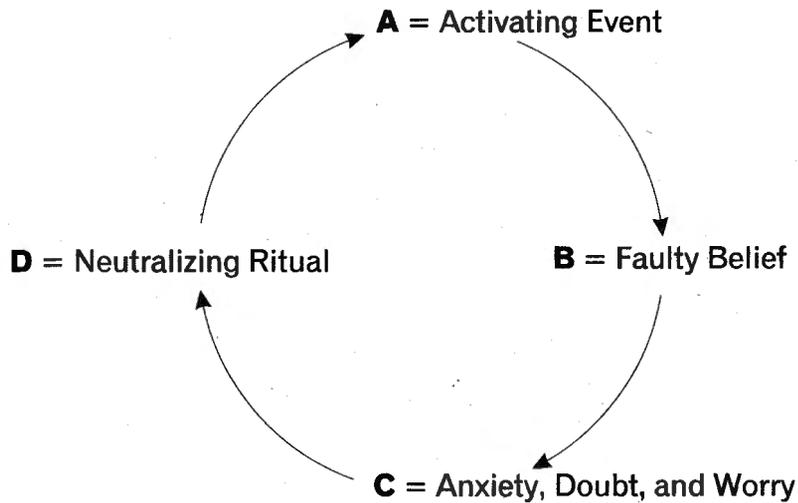
The intrusive thought is automatically interpreted literally to mean something very dire is likely to happen unless some action is immediately taken to reduce the anxiety associated with the thought and prevent harm to a loved one or oneself. These intrusive thoughts, rather than being dismissed as "just thoughts," are given great importance and meaning. The list of cognitive errors a bit earlier in the chapter included examples of specific faulty beliefs. Later in the chapter, we'll take a look at some examples of events or situations that typically activate cognitive errors and the unrealistic beliefs that typically result for those who have OCD.

C = Emotional Consequences: Anxiety, Doubt, and Worry

Faulty beliefs or inaccurate appraisals of thoughts trigger high levels of doubt, anxiety, and worry. The feelings of anxiety are, in turn, appraised as intolerable, unacceptable, and dangerous. For a person with OCD, the anxiety spins out of control, resulting in a powerful urge to relieve the anxiety however possible.

D = Neutralizing Ritual or Avoidance

A compulsive action or set of actions such as excessive or ritualistic washing, checking, repeating, or ordering brings the anxiety under control briefly. Persistent avoidance of triggering events and situations can also be considered a compulsion. Either way, it sets the stage for the next activating event, creating an endless cycle. Although the neutralizing ritual may temporarily relieve anxiety, this only serves to reinforce the entire cycle.



- A = Activating event and intrusive thought, image, or urge
- B = Faulty belief about the intrusive thought
- C = Emotional consequences: anxiety, doubt, and worry
- D = Neutralizing ritual or avoidance

CORRECTING FAULTY BELIEFS

Cognitive restructuring is the technical phrase for the process of directly challenging cognitive errors and the resulting faulty beliefs, including those that underlie OCD behaviors. This process doesn't put an end to cognitive errors. Rather, cognitive restructuring helps you in two ways: It helps you see that you have choices as to how you interpret your thoughts and that making different choices can make a difference in the level and intensity of your OCD. And by increasing your awareness of the faulty ways you interpret your thoughts, you can become more objective about them, rather than overreacting to them.

Cognitive Restructuring: How and When to Use It

While cognitive restructuring is useful for correcting the faulty beliefs that maintain OCD behaviors, please consider the following points as you start to work on your faulty beliefs:

- Though some studies have shown cognitive restructuring to be at least as effective as exposure and response prevention (Wilhelm et al. 2005), Dr. Hyman's experience is that cognitive restructuring is best used to enhance and bolster the effects of ERP, not as a substitute for it. According to Dr. Edna Foa, a leading expert on ERP, the best tool for correcting the faulty beliefs of OCD is ERP. It's important to take on the hard work of

chapters 4, 5, and 6 first, and then use the cognitive restructuring exercises in this chapter to enhance your progress.

- Use cognitive restructuring to help change faulty beliefs that persist when a course of ERP hasn't been successful at modifying these ideas (for example, that it's likely you'll be contaminated by HIV or burn down the house because of not checking that the stove is off).
- Cognitive restructuring is often helpful for those whose rituals and compulsions are primarily performed mentally.
- In chapter 6, you rated the degree to which you believe in your obsessions and the necessity of your compulsions. If you rated your belief in your feared consequences of not doing rituals at 70 percent or higher, it's best to work on cognitive restructuring first—at least until your degree of belief goes down below 70 percent.
- Remember that, as mentioned in chapter 2, reassuring self-talk or mantras can become compulsions too, if you use them habitually to relieve the anxiety associated with obsessive thoughts. Be careful not to incorporate cognitive restructuring techniques in a manner that provides reassurance or an escape from anxiety. If you find yourself doing this, hold off on cognitive restructuring exercises and focus more on ERP.

Cognitive Restructuring Step-by-Step

By learning to challenge your faulty beliefs, you make the cycle of obsessions and rituals less habitual and automatic. Challenging your faulty beliefs is like throwing a wrench into the gears of the well-oiled engine of your OCD thinking, giving you more freedom and control over the impact that your thoughts have on you and your behavior. Challenging your faulty beliefs is a two-step process:

1. Identify your activating events or situations, plus the accompanying intrusive thoughts, and then identify the faulty beliefs associated with the thoughts.
2. Challenge your faulty beliefs with more realistic self-talk.

STEP 1. IDENTIFY ACTIVATING EVENTS, INTRUSIVE THOUGHTS, AND FAULTY BELIEFS

It's important to know exactly which situations or events activate a specific intrusive thought, feeling, or urge, and what faulty beliefs are involved. The following table provides some examples of common activating events in OCD, the accompanying intrusive thought, along with the faulty belief associated with it. Then, in the right-hand column, we've indicated the categories of cognitive errors those faulty beliefs represent.

Common Activating Events, Intrusive Thoughts, and Faulty Beliefs			
Activating event	Intrusive thought	Faulty belief	Cognitive errors
Locking the front door upon leaving for work	What if it's not locked?	I have to be very careful. If I make a mistake and there's a break-in, it will be my fault and I'll suffer forever.	<ul style="list-style-type: none"> ● Overvaluing thoughts ● Overcontrol and perfectionism ● Overestimating risk, harm, and danger ● Intolerance of uncertainty ● Overresponsibility
Touching the doorknob in a public bathroom without tissue paper	What if I contract a horrible disease?	I'll definitely get sick unless I take measures to prevent it.	<ul style="list-style-type: none"> ● Overestimating risk, harm, and danger ● Intolerance of uncertainty
Seeing the silhouette of a naked child in a shower stall and immediately looking away	What if I enjoyed what I saw for even a millisecond?	Deep down, I'm truly a child molester or pedophile.	<ul style="list-style-type: none"> ● Thought-action fusion ● What-if thinking ● Overvaluing thoughts
Looking in a mirror to be sure every hair is perfectly even	What if people ridicule me?	I must keep cutting my hair until it looks perfect, even if it takes hours.	<ul style="list-style-type: none"> ● Overcontrol and perfectionism ● Persistent doubting
Seeing a banana peel on a sidewalk across a busy street	What if someone slips on it?	I'll be guilty of negligence and punished unless I remove it and prevent others from slipping on it and being injured.	<ul style="list-style-type: none"> ● Overresponsibility ● Overcontrol and perfectionism
Switching off a light switch	Thinking of my daughter dying in a car crash	I must turn the switch off five times in a row, perfectly, or something bad will happen to my daughter.	<ul style="list-style-type: none"> ● Overvaluing thoughts ● Overcontrol and perfectionism
Twisting the lids on jars of food closed extremely tightly	What if they aren't completely sealed?	I must make absolutely sure the top of the jar won't open; if the food spoils, someone could get really sick and it will be my fault.	<ul style="list-style-type: none"> ● Overvaluing thoughts ● Overcontrol and perfectionism ● What-if thinking ● Intolerance of uncertainty

Now that you've seen some examples, it's time to explore your own activating events and associated intrusive thoughts, faulty beliefs, and cognitive errors. Write the activating situation or event in the first column, the related intrusive thought in the second column, and the related faulty belief in the third column. Finally, write the cognitive errors your faulty belief represents in the fourth column, using the lists from earlier in this chapter. (You may also use your journal to do the exercises in this chapter.) Frequently, more than one cognitive error is operating in any given intrusive thought or faulty belief, and some of the errors are overlapping or similar. The important thing isn't to "get it right" or exhaustively list every category that could be involved. Just identify the cognitive errors that seem most fitting to you so that you can come up with coping statements to counter them.

<i>Common Activating Events, Intrusive Thoughts, and Faulty Beliefs</i>			
Activating event	Intrusive thought	Faulty belief	Cognitive errors

STEP 2. CHALLENGE YOUR FAULTY BELIEFS WITH REALISTIC SELF-TALK

Now that you've identified some of your intrusive thoughts, the situations that trigger them, and the associated faulty beliefs and cognitive errors, you can begin to challenge these faulty ideas generated by your "OCD brain." These images and ideas can be very strong and are almost always based on negative feelings concerning future harm and danger, so they feel compelling. To challenge them, you need to note when they occur, and then challenge these unrealistic appraisals of the triggering situations. Note that many people confuse this step with so-called positive thinking. However, the goal is to be an accurate thinker, not necessarily a positive thinker. Accurate thinking means you identify your OCD-based thoughts and label them as such. Even this simple step can give you some much-needed distance from these thoughts. Once you see them for what they are—just thoughts, and OCD thoughts, at that—you'll have more freedom to identify the true facts about the situation and choose to appraise it differently.

To get an idea of how this works, take a look at the following table, which gives some examples of ways to fight specific faulty beliefs and unrealistic appraisals with more realistic self-talk. This strategy can help you cope with difficult situations when obsessive thoughts arise by decreasing their power and thus diminishing the urge to perform compulsive behavior in response to these troublesome thoughts.

Coping Self-Talk		
Cognitive error	Faulty Belief	Realistic response
Overestimating risk, harm, and danger	<i>I must always be protecting myself (or others or loved ones) from danger, even if there's only the remotest chance of something bad happening. I'll presume the situation is dangerous until it can be proven safe.</i>	<ul style="list-style-type: none"> ● <i>I must learn to take a chance in order to get better.</i> ● <i>What would a prudent person (someone who doesn't have OCD) do in this situation?</i>
Overcontrol and perfectionism	<i>I must maintain absolute control over my thoughts and actions and over everything bad that can possibly occur in my life.</i>	<ul style="list-style-type: none"> ● <i>Maintaining control is so exhausting. I think I'll take a chance on being imperfect for a change, even if it's hard to do.</i> ● <i>I'm afraid of change, but it's just my OCD brain playing tricks on me.</i> ● <i>For a change, I'll strive for good enough, rather than perfect.</i>
Catastrophizing, Black-and-white or all-or-nothing thinking	<i>Unless I'm sure everything is perfectly safe, I am in terrible danger, or my loved ones are.</i>	<ul style="list-style-type: none"> ● <i>What is the evidence of danger here? There's no proof that something bad is inevitably going to happen.</i>
Persistent doubting	<i>Maybe I harmed (molested, injured, cheated stole, plagiarized, and so on).</i>	<ul style="list-style-type: none"> ● <i>It's my OCD brain playing tricks.</i> ● <i>I know logically what's what.</i> ● <i>I'm not buying into these needless fears!</i>

<p>Magical thinking, Thought-action fusion, Overvaluing thoughts</p>	<p><i>Merely thinking a bad thought will cause something bad to happen.</i></p>	<ul style="list-style-type: none"> ● <i>It's only a thought. I am not my thoughts. It's just an OCD thought, and therefore means nothing. Only actions can harm, not thoughts.</i>
<p>Superstitious thinking</p>	<p><i>By doing my ritual I can ward off bad things from happening to me and protect those I love.</i></p>	<ul style="list-style-type: none"> ● <i>These rituals are so tiring. I must take the chance to discover that I can't control the outside world this way. My rituals protect no one, and they torment me and those around me.</i>
<p>Intolerance of uncertainty</p>	<p><i>If I'm even slightly uncertain about anything (my future, my health, and the health of my loved ones), it is intolerable</i></p>	<ul style="list-style-type: none"> ● <i>I can remain calm in the face of uncertainty. Since I can't control everything, why try? By trying to control everything, I only make my OCD worse.</i> ● <i>If I don't act on my need for absolute certainty, the urge to do a ritual will diminish after a while.</i>
<p>Overresponsibility</p>	<p><i>Maybe I'll cause something bad to happen, and if I fail to prevent it, that will mean I'm a very bad person.</i></p>	<ul style="list-style-type: none"> ● <i>I'm only human. My responsibilities end where others' responsibilities begin.</i> ● <i>I can be a good citizen without having to be everyone's guardian angel.</i>
<p>Pessimistic bias</p>	<p><i>If something bad is going to happen, it is much more likely to happen to me or to someone I love or care about than to others.</i></p>	<ul style="list-style-type: none"> ● <i>The probability of something bad happening to me or my loved ones is no greater than the probability of bad things happening to anyone else. I'm not so special!</i>
<p>What-if thinking</p>	<p><i>What if I do it wrong (make a mistake, get cancer, get AIDS, cause someone harm)?</i></p>	<ul style="list-style-type: none"> ● <i>The torture I put myself through by worrying about the future is probably worse than anything that could happen. I'll deal with trouble when it happens, not before.</i> ● <i>Living my life in terms of what-ifs only wastes my time. What are the true odds of getting cancer or AIDS, or causing someone harm? The odds are much smaller than my OCD brain wants to believe.</i>

Intolerance of anxiety	<i>I can't stand being anxious for even a short period of time. I'll do anything to feel better now.</i>	<ul style="list-style-type: none"> ● <i>I can handle the discomfort. I don't have to do a ritual now. My anxiety level will go down if I just wait it out.</i>
Emotional reasoning	<i>This danger feels so real, I cannot not pay attention to it.</i>	<ul style="list-style-type: none"> ● <i>My feelings are not the facts. I can treat these feelings as false alarms that I choose not to react to</i>

Now that you have some idea about how to fight faulty OCD beliefs with coping self-talk in the form of more realistic appraisals, try to come up with some statements to counter the faulty beliefs you identified in the previous exercise. The following worksheet will help you assess how helpful each statement is. Before you start, make copies of the worksheet so that you can use it for a variety of activating events and faulty beliefs. Here are some instructions for using the worksheet:

1. Write down an activating event that regularly triggers your intrusive thoughts and resulting anxiety.
2. Write a description of the intrusive thought that occurs in the situation and the faulty belief that results in anxiety and discomfort.
3. Rate the SUDS level (0-100) of your discomfort associated with that thought.
4. Using a percentage (0-100%), assess the degree to which you believe your appraisal is an accurate depiction of the situation as it really is.
5. Decide which categories of cognitive errors are involved in your faulty belief. There may be more than one cognitive error involved, and if you aren't sure, that's okay too.
6. Write a more realistic response or coping statement that you could use in this situation to talk back to your OCD. When you write your coping statement, you should use the exact words that your logical brain comes up with. If you feel uncertain, use the "Realistic response" column from the preceding table to guide you.
7. Using a percentage, rate the degree (0-100%) to which you truly believe in this more realistic response *right now*.
8. Repeat this exercise for as many different activating events as you can.

Challenging Your Faulty Beliefs

Activating event: _____

Intrusive thought: _____

Discomfort (SUDS level 0-100): _____

Faulty belief: _____

How much do you believe this thought is true? (0-100%): _____

Which categories of cognitive errors are at work here? (choose from the list above)

Realistic response or coping statement: _____

How much do you believe this realistic response is true? (0-100%): _____

ADDITIONAL WAYS TO CHALLENGE FAULTY BELIEFS

The previous section helped you challenge your faulty beliefs by changing your self-talk when an OCD thought occurs. This requires consistent practice. Another way to challenge the faulty beliefs of OCD is through the use of a variety of behavioral “experiments.” These experiments provide an opportunity for you to dispute your OCD predictions of potential harm and catastrophic danger. By testing out your faulty beliefs in the real world, you will further weaken their grip on your thinking.

Challenging Magical Thinking, Thought-Action Fusion, and Overvalued Ideas

You can use the following exercises to test the faulty belief that thoughts can cause bad events to occur and that thoughts are the same as actions (Freeston, Rheaume, and Ladouceur 1996). While these experiments may at first seem silly, by testing your prediction that your thoughts can cause something to happen against the actual outcome when you purposely think certain thoughts, you can begin to challenge faulty beliefs about the magical power of your thoughts.

Think and win. Purchase a lottery ticket on Monday and think about winning the grand prize for half an hour every day (the typical odds are 27,000,000 to one). In your mind, create as vivid an image of yourself winning as you can. Then, at the time of the drawing for the big prize, note the outcome and ask yourself, “To what extent did my repetitively thinking these thoughts influence the outcome of the lottery? What effect did all of my thinking have on what actually happened?”

Think and break. Choose an old small appliance (like a toaster) that is in good working order. Every day for one week, write on a piece of paper, “The toaster will break.” Each day, write it one hundred times and picture the broken appliance in your mind each time. After one week, examine the outcome. Did your thoughts affect the appliance?

Think dying goldfish. Buy a goldfish and a fishbowl from a local pet store. Set it up at home and provide normal, proper care for the fish. For fifteen minutes twice daily, vividly imagine the fish dying. First imagine it gasping. Then imagine it dead and floating on the surface of the water instead of swimming in the bowl. Repeat this every day for a week and observe the effect on the fish. If you believe that thoughts can cause bad events to happen, the goldfish should die.

Challenging Hyperresponsibility

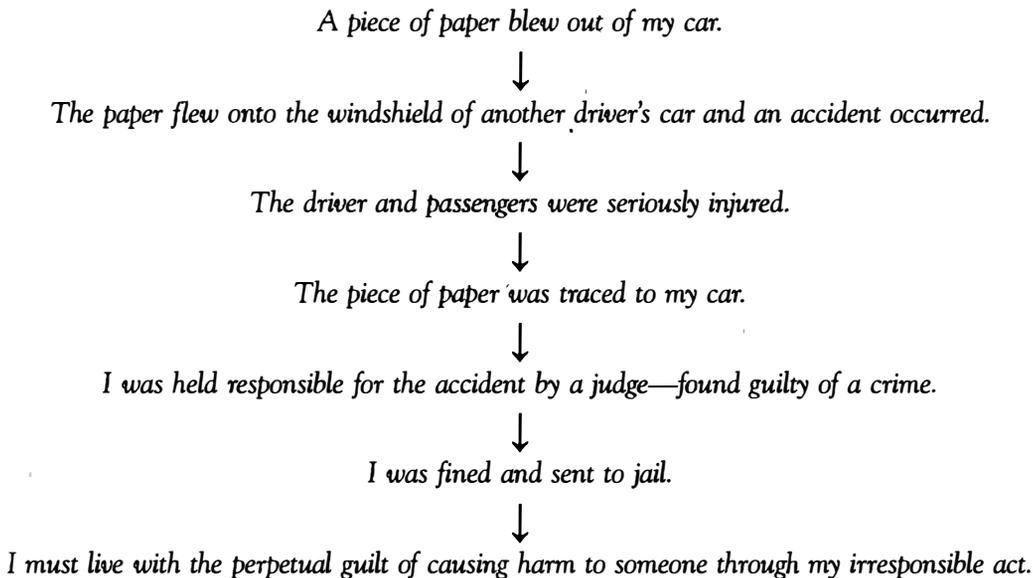
As a person with OCD, you often fail to consider the numerous factors that may contribute to a negative event, such as losing your job or the illness of a loved one. Even when it clearly doesn't make

sense, you tend to assume the entire burden for preventing negative events. The pie chart technique can help you attribute responsibility for negative events more accurately and appropriately.

To demonstrate the pie chart technique, let's consider Michael's situation. He has an obsessive concern with the possibility of harming others through his own carelessness. He checks constantly that he hasn't injured others by acting carelessly; for example, by spilling water on the floor and causing someone to slip and fall. He usually keeps his car windows rolled up for fear that something in his car might fly out and cause an accident.

His present obsession is that a piece of paper that flew out of his car window obstructed another driver's view and resulted in an auto accident. He had briefly rolled down the window to get some fresh air. The wind blew a folder on the passenger seat open, and a piece of paper flew out. It wasn't an important piece of paper, but Michael believes it possibly had his name on it, and maybe even his address.

Now he worries constantly about that piece of paper and the accident it may have caused. Sounds silly, doesn't it? Even Michael, an intelligent professional engineer, admits it. Yet despite the complete lack of evidence of any accident occurring as a result, in Michael's OCD-style thinking, he sees his actions as the primary cause of an unfortunate chain of events. This type of thinking ignores all other possible factors that could result in auto accidents, aside from his "carelessness." Using a technique known as the *downward arrow* (Burns 1980), we can take a close look at the sequence of ideas and beliefs that make up Michael's obsession:



Putting aside that in Michael's case there's no evidence that an accident actually occurred, in every mishap there are a number of possible contributing factors. In Michael's case, some of the factors that might contribute to an auto accident include mechanical problems, the carelessness of other drivers, road conditions, weather, and so on. To begin to more accurately assess the degree to which your actions may have contributed, it's useful to list all of the other potential contributing factors, and then assess the probability that each contributed.

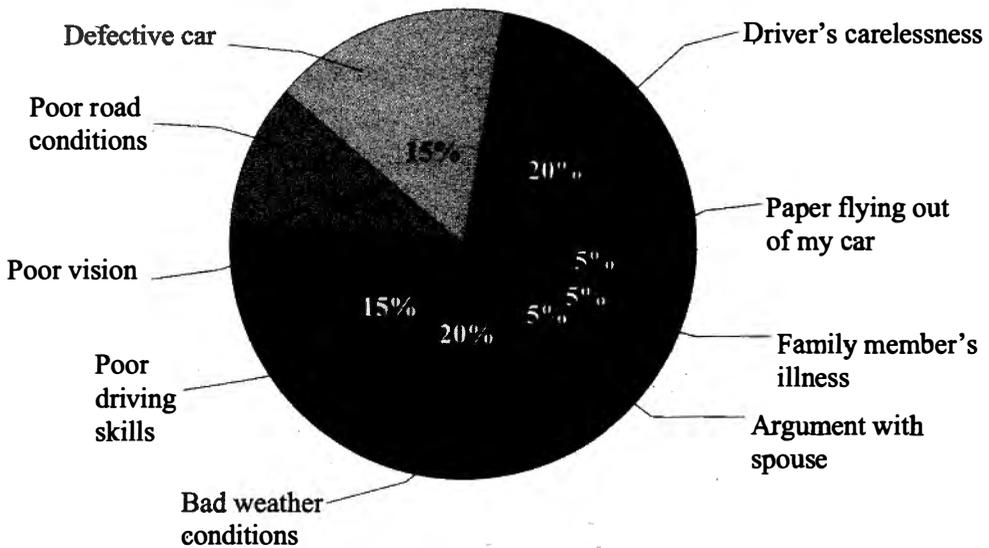
Here's what Michael came up with for this exercise. Note that all of the various factors add up to 100%.

Possible cause of an accident or mishap

Probability that
it contributed
(0-100%)

1. Defective car	15%
2. Driver carelessness	20%
3. Paper flying out of my car and onto the road	5%
4. Other driver upset over a family member's illness	5%
5. Other driver upset by an argument with spouse	5%
6. Bad weather conditions	20%
7. Poor driving skills	15%
8. Other driver's poor vision	5%
9. Poor road conditions	10%
TOTAL	100%

Pictured as a pie chart, all of the competing factors would look like this:



Assigning Responsibility More Realistically

Using Michael's case for guidance, do the following exercise. It will help you brainstorm other possible factors involved in a mishap or potential mishap, and then assess the probability of each and put your own potential responsibility in perspective. This is a very effective way to work on faulty assumptions about your own guilt and responsibility.

Describe in detail your obsessive concern regarding your responsibility for the safety of others and the possibility that others might be harmed. Write a specific scenario where someone could be injured as a result of your negligence:

With this scenario in mind, list all of the possible factors that could result in the consequences you fear. There are no right and wrong responses; just write whatever comes to mind. For each cause, estimate the percentage of its contribution to the scenario. Don't worry if the factors don't add up to exactly 100%; an approximation is fine.

Possible cause of an accident or mishap	Probability that it contributed (0-100%)
TOTAL	100%

Now ask yourself the following questions.

Based solely on the possible causes and probabilities you recorded above, if you knew an accident actually had happened and you didn't know anything about the specifics, what is the likely cause of the accident?

What is the evidence for your decision?

Is your decision based on your feelings about what might have happened or on the probabilities you assigned above?

Are you certain about your decision?

If you aren't certain, how uncomfortable are you with not knowing for sure?

How strongly do you rate your responsibility for the accident or mishap? (0-100%)

If you rated your responsibility higher than 50%, is this consistent with the evidence you recorded above, about all of the other factors that could possibly cause it to happen?

Based on this exercise, you may now have a clearer idea that, for any accident or mishap, many factors could be responsible, beyond your potential contribution. As you can see, accurately assigning responsibility for something going wrong is complicated. The OCD brain overly simplifies this complex calculation in a way that defies both logic and the facts. In the absence of perfect certainty, people with OCD automatically make assumptions like "It's all my fault, and I'm going to be punished for it."

Challenging the "Evidence" Against You

Many people with OCD have described their experience as feeling like being in a court of law, accused of some act of negligence that resulted in harm to others for which little, if any, real evidence exists. Despite the lack of evidence, you are nevertheless on the witness stand, being vigorously

prosecuted by the “OCD attorney.” Unlike our present legal system, where a person is innocent until proven guilty, in the courtroom of OCD-related thoughts and ideas you feel guilty until proven innocent. You must somehow prove with absolute certainty that you didn’t do something bad, negligent, or harmful. The overbearing, cunning “OCD attorney” in your mind is hurling wild accusations, citing even the most circumstantial, remotely related evidence to cast doubt on your innocence. Each piece of “evidence” brings waves of anxiety and fear, and the more you try to defend yourself or argue with the prosecution, the guiltier you feel—and the guiltier you look to the jury. The following table provides some examples of the type of evidence the “OCD attorney” might cite.

Obsessive thought	Evidence from “the OCD attorney”
<i>I must have caused a highway accident while driving because I was distracted.</i>	<ul style="list-style-type: none"> ● <i>I turned the radio volume up loud, and I was humming to the music.</i> ● <i>I blinked and my glasses were dirty, so I didn't see the road perfectly.</i> ● <i>My cell phone rang while I was driving, which distracted me for a second.</i>
<i>I must have come into contact with HIV while in line at the grocery store. I'll make my child sick unless I wash everything.</i>	<ul style="list-style-type: none"> ● <i>The cashier had a cut on her arm and could have contaminated my groceries.</i> ● <i>I had a fresh paper cut on my finger.</i> ● <i>I placed the contaminated groceries in my car in the place where my child often sits.</i>
<i>The image of my mother dying popped into my head while turning off the office light. She's now in danger unless I do a ritual to protect her.</i>	<ul style="list-style-type: none"> ● <i>This thought feels very dangerous.</i> ● <i>This happens over and over. It must be an omen.</i>

Facing the “Accuser”

This exercise will help you challenge the accusations of your OCD. First you’ll write down your worst fear, such as causing an accident or harm to others or yourself as a result of doing something negligent. Next, you’ll record the accuser’s “evidence” that the statement is true. It could be some remotely related fact, something irrelevant, or just that “it feels that way.” Then you’ll rate the degree to which you *truly* believe that the evidence proves that your worst fear actually happened, or that if it did, you would be responsible.

In the second part of the exercise, you’ll logically challenge whether the evidence cited *really* proves your obsessive fear. The goal isn’t to completely rid yourself of the guilt and discomfort of the intrusive thought, but to reduce it significantly, tolerate it better, and take the air out of OCD’s claims that you are guilty or responsible for catastrophes.

The "Evidence" Against You

Obsessive thought:

What is the evidence to support that the feared event took place, or that if it did, you would be responsible? (The "accuser" is pointing the finger at you! Write down as many as you can think of. Most people come up with three to five.)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

Based on this evidence, rate the degree to which you truly believe your worst fear could actually occur, or that if it did, you would be responsible, using a scale of 0 to 100%: _____ %

Challenging the "Evidence"

1. Is the fact that (write evidence #1) _____
really evidence of danger? Explain why not:

2. Is the fact that (write evidence #2) _____
really evidence of danger? Explain why not:

3. Is the fact that (write evidence #3) _____
really evidence of danger? Explain why not:

4. Is the fact that (write evidence #4) _____
really evidence of danger? Explain why not:

5. Is the fact that (write evidence #5) _____
really evidence of danger? Explain why not:

6. Is the fact that (write evidence #6) _____
really evidence of danger? Explain why not:

7. Is the fact that (write evidence #7) _____
really evidence of danger? Explain why not:

8. Is the fact that (write evidence #8) _____
really evidence of danger? Explain why not:

Once you've argued against each bit of "evidence," answer the following question: Using a scale of 0 to 100%, how would you now rate the probability of your fear actually occurring, or that if it did, you would be responsible? _____ %

At this point, you're probably better able to argue back against the accuser and find some relief from the negative thoughts your OCD presents as "evidence." We have one cautionary note about this approach: Beware of playing into the accuser's game by repeatedly arguing back against the OCD in a compulsive or repetitive manner. This would mean that OCD has hooked you into compulsions again. If this happens, stop immediately. You can make significant progress by merely acknowledging that your accuser's claims are false and just letting them be there without even doing anything to challenge these

claims. Eventually, your accuser will get bored and the obsessive thoughts will burn out on their own as a result of your decision to not respond to them.

If you challenge OCD's accusations and find that your belief in the probability of your fear actually occurring hasn't decreased or has decreased only a little, you may be stuck because of overvalued ideas, discussed earlier in this chapter and in chapter 4. If this is the case, medication may help you get your beliefs "unstuck" so you can make progress.

Challenging Overestimation of the Likelihood of Harm

A common theme of the intrusive thoughts discussed throughout this book is an overestimation of the likelihood that some catastrophic event will occur as a result of carelessness. In essence, these thoughts often start with "What if..."; for example, "What if I get AIDS?" or "What if I didn't turn off the stove?" or "What if I ran over someone without knowing it?"

A helpful way to challenge what-if thinking is to use a modification of the downward arrow technique, described earlier, to estimate the perceived probability of the horrific event occurring versus the actual probability. Let's take the example of Michael's fear of a piece of paper flying out of his car window, causing a horrific accident and leading to his incarceration. First, Michael estimates the likelihood, from 0 percent likely to 100 percent certain probability, that such a series of events could occur. He estimates that to be 50 percent, meaning that he believes there's a 50 percent chance that a piece of paper blowing out his car window would result in a horrific accident.

To challenge this belief, Michael constructs a very detailed downward arrow sequence of exactly how he perceives this horrific event occurring:

A small piece of paper accidentally blows out of the window of my car.



The paper is picked up by a gust of wind.



The wind carries the paper into traffic.



The paper flies in front of another car.



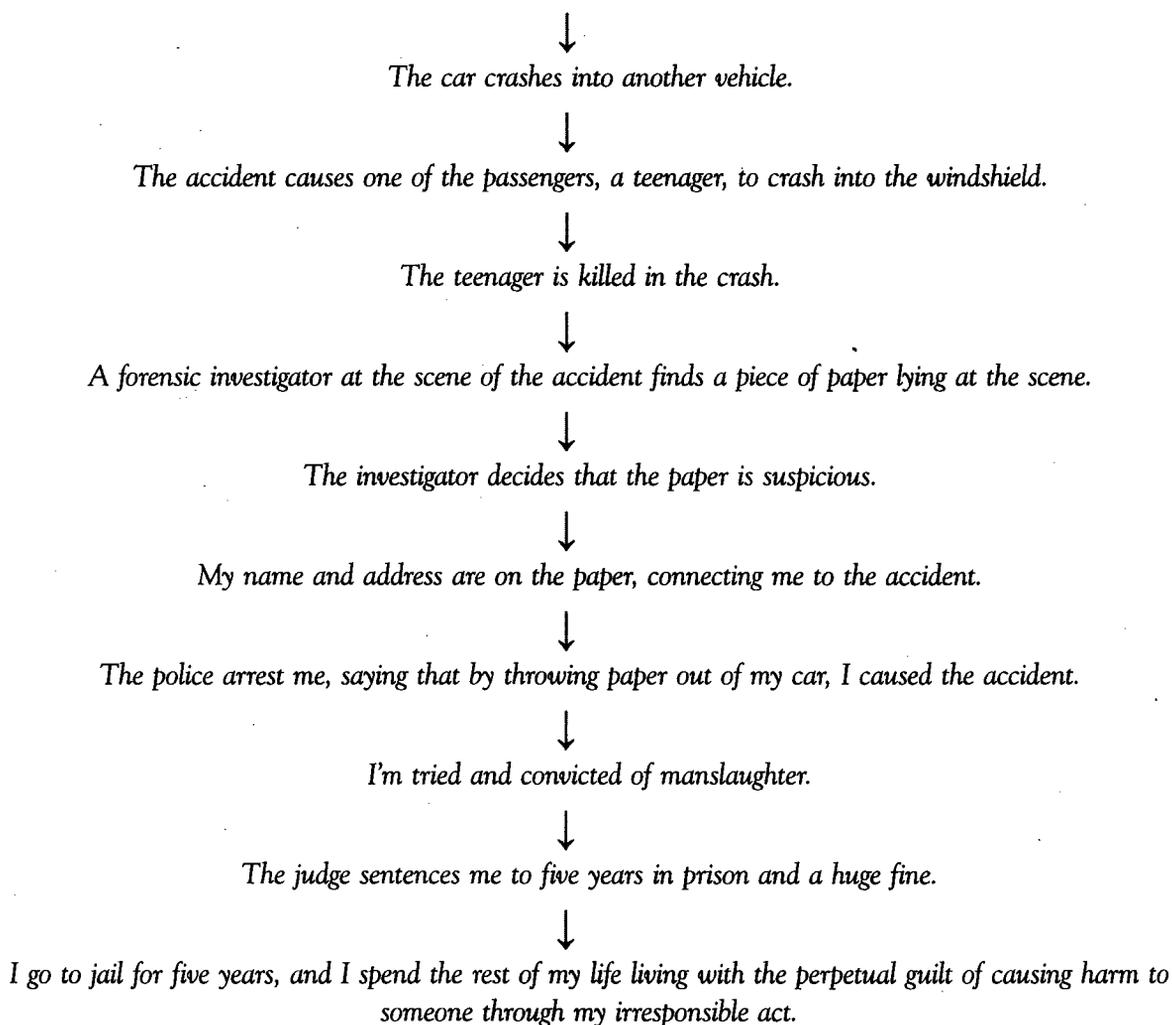
The paper lands on the windshield of a moving car.



It lands in the exact spot to block the vision of the driver.



The driver is so startled that he loses control of the car.



Next, Michael rates the probability (0-100%) of each segment of the causal chain of events. He comes up with the following estimates.

What if a piece of paper blew out of my car?	Probability (0-100%)
<i>A small piece of paper accidentally blows out of the window of my car.</i>	20%
<i>The paper is picked up by a gust of wind.</i>	33%
<i>The wind carries the paper into traffic.</i>	5%
<i>The paper flies in front of another car.</i>	5%

<i>The paper lands on the windshield of a moving car.</i>	3%
<i>It lands in the exact spot to block the vision of the driver.</i>	2%
<i>The driver is so startled that he loses control of the car.</i>	10%
<i>The car crashes into another vehicle.</i>	10%
<i>The accident causes one of the passengers, a teenager, to crash into the windshield.</i>	20%
<i>The teenager is killed in the crash.</i>	33%
<i>A forensic investigator at the scene of the accident finds a piece of paper lying at the scene.</i>	5%
<i>The investigator decides that the paper is suspicious.</i>	5%
<i>My name and address are on the paper, connecting me to the accident.</i>	5%
<i>The police arrest me, saying that by throwing paper out of my car, I caused the accident.</i>	3%
<i>I'm tried and convicted of manslaughter.</i>	3%
<i>The judge sentences me to five years in prison and a huge fine.</i>	5%
<i>I go to jail for five years, and I spend the rest of my life living with the perpetual guilt of causing harm to someone through my irresponsible act.</i>	33%

To find the probability of the entire sequence of events occurring, you multiply the probabilities of all of the separate events. For the purposes of multiplication, each percentage should be expressed as a decimal. In Michael's case, he would multiply 0.20 by 0.33 by 0.05 and so on, down the entire sequence. His final answer was an infinitesimal probability: 0.000000000000000012 percent. In fact, even if you calculate the sequence only to the point where the teenager crashes into the windshield, the probability is still an exceedingly small 0.000000002 percent. This exercise helped Michael see that the actual probability of his feared event was nowhere near the 50 percent probability he estimated before the exercise. This allowed him to acknowledge that his intrusive thoughts of causing harm and danger through negligence are greatly exaggerated ideas, not to be given any credence.

Challenging Intrusive Thoughts About Losing Control

A common theme of what-if thinking involves an obsessive preoccupation with the idea of snapping, or losing control and suddenly acting in a way that's alien to how you know yourself to be. People with this obsession often believe that normal emotions, such as fear, doubt, and anger, are dangerous and should be avoided at all costs. For example, Robert, a salesman with OCD, avoided all social situ-

ations for fear of getting angry and losing control in a public place. His downward arrow sequence goes as follows:

What if I'm in a restaurant and scream at the waiter, calling him a jerk?



I would become extremely anxious.



Being anxious, I could lose control of myself.



If I lose control, I could go on to call the waiter lots of other names.



I'll be embarrassed in front of all of the other customers.



Everyone will stare at me with contempt or hatred.



I'll go crazy.



They'll take me away in a straitjacket.



I'll be locked up in a psychiatric ward.



I'll go even crazier from being locked up.



I'll never escape the shame of it all.

In Robert's case, what-if thinking combined with the notion that anger is dangerous resulted in extreme isolation due to his avoidance of any public or social situation where anger or anxiety could possibly be triggered.

If you suffer from this sort of what-if thinking, one helpful strategy is to construct an imaginal exposure using the steps outlined in chapter 7. By repeatedly confronting the feared situation in your imagination, the imagery of danger becomes increasingly less potent.

Another strategy is to devise an experiment in getting angry or "losing control." For this approach, you'll need a partner to help you role-play a feared scenario:

1. Make an audio recording of a five-minute role play of a situation that typically or potentially arouses your anger (or whatever emotion you have difficulty with). It can be an ongoing situation from your life or something that typically irks you, such as when it

seems that a salesperson is purposely trying to cheat you. Taking this as an example, allow yourself to argue vigorously with the person playing the role of the salesperson. Allow the dialogue to become more and more heated, and let your language become stronger as your temper rises. You may even start yelling. Punch a pillow if you like. Really let go!

2. Now listen to the recording. If you think you can make it even more dramatic, try recording it again. Once you have the finished product, listen to it and observe your anxiety level as you listen. Does it go up to a SUDS level of at least 60 or 70? If it does, listen again and again until your SUDS level decreases by at least half.
3. If your anxiety level doesn't go up, try practicing your role play in public with a partner. You could do this in a restaurant, a park, a store—anywhere you have a strong fear you'd be embarrassed and lose control. Practice the role play for five minutes and note your SUDS level. Do the role play in different public places that evoke anxiety until you habituate to the worry and are reasonably comfortable experiencing that emotion in public.

WHAT IF YOUR BELIEFS AREN'T CHANGING?

Sometimes the process of changing unrealistic assumptions and faulty beliefs can be quite challenging. Once the powerful cycle of obsessive fears and compulsive rituals is locked into place, it's extremely difficult to change beliefs about what is harmful and dangerous and what isn't. If your beliefs seem extremely resistant to change, here are a few things you can try:

- One key to changing entrenched obsessional fears is to do the opposite of what your OCD beliefs direct you to do. If you can't change the beliefs directly, work extra hard to change what you actually *do* in the face of faulty beliefs. For example, the best way to change the faulty belief that to prevent disease you must avoid sitting on "contaminated" furniture and touching "contaminated" objects is to do the opposite: Take the chance, face your fears, and sit on the feared furniture and touch the feared objects. (This is the heart of ERP, which you learned in chapter 6.) Just do it, even though your OCD brain is sending messages of impending illness and death. If you consistently act in a manner that's opposite to what your OCD beliefs direct you to do, these entrenched beliefs will gradually change.
- Although it may seem scary, work on letting go of being in total control of whatever you worry about. A useful approach to letting go of an obsessional fear or worry is to shout to yourself, "*I'm in charge here, and I'm not going to do this anymore!*" and then walk away without doing your ritual.
- Acknowledge that although the faulty beliefs associated with your OCD may cause you pain, you may be holding on to your faulty beliefs without realizing it. The fact is, you may be reluctant to change them. This makes sense, in an OCD way. For some people with OCD, these beliefs provide a way of feeling safe and in control of a world that often seems scary and unpredictable. Ask yourself if the price you're paying for this feeling of control and safety is worth the impact it's having on your life.

- Consider taking medication for your OCD, or changing medications. The proper medication can help to lessen the grip of intrusive thoughts significantly. When the medication is effective, changing your thoughts, rituals, and beliefs will be easier.

HELP FOR FAMILY AND FRIENDS

As a family member or friend of someone with OCD, could you also be harboring some faulty beliefs about your loved one's recovery? If you're shocked that we would even ask such a question, ask yourself what you think would happen if you didn't reassure your loved one in the midst of an OCD meltdown. What do you think would happen if you didn't participate in rituals or didn't purchase certain items that your loved one demands? Could it be that your loved one is more resilient than you think? Perhaps he or she could further challenge the OCD if you were to withdraw some of your support for OCD behaviors—in an agreed-upon way.

Below, we've outlined some typical faulty beliefs of friends and family members of people with OCD, along with more realistic thoughts. Use these as a guide in challenging your own unrealistic appraisals.

Cognitive error	Faulty belief	Realistic response
Overestimating risk, harm, and danger	<i>If I don't reassure my husband, he'll be so uncomfortable that I won't be able to stand it.</i>	<i>I can best support my husband's recovery by not throwing him a rescue rope every time he gets anxious. It's the illness that I must stand up to, not my husband.</i>
	<i>I feel so guilty if my wife is uncomfortable. If something bad happens, I'll never forgive myself.</i>	<i>By not giving my wife reassurance, I'm taking a stand for her growth and recovery from OCD.</i>
Overcontrol and perfectionism	<i>My partner should let me help her more with her exposure practices.</i>	<i>It's okay if she'd rather do it herself. The overall goal is to manage OCD on her own.</i>
Catastrophizing	<i>My son will never get a decent job or stand on his own two feet.</i>	<i>I'm not a fortune teller. No one knows what the future may hold. Plus, negativity and cynicism won't further his progress.</i>

Cognitive error	Faulty belief	Realistic response
<p>Black-and-white or all-or-nothing thinking</p>	<p><i>ERP practice exercises should be done completely and perfectly, or he'll never get better.</i></p>	<p><i>No exposure practice will go perfectly. What's important is that he's trying and doing the best he can at this point in his recovery.</i></p>
	<p><i>He slipped today and washed illegally. He's such a loser!</i></p>	<p><i>He slipped today. I can help him figure out what might have gone wrong. Then maybe he can correct it and look forward to tomorrow.</i></p>
	<p><i>She should be better by now. Why can't she just get over it?</i></p>	<p><i>She's fighting the battle her of life, and OCD is a horrific foe. I want to hang in there and help her over the long haul.</i></p>
<p>Overresponsibility</p>	<p><i>If I don't participate in my husband's rituals, he might lose his job.</i></p>	<p><i>I'll participate in rituals only enough to keep food on the table, and I'll try to support my husband's recovery by cutting back my enabling wherever possible.</i></p>
<p>What-if thinking</p>	<p><i>What if this program doesn't work? How will my husband cope? How will I survive?</i></p>	<p><i>I can hang in there as this recovery process proceeds one step at a time. I'll cross those bridges when I come to them.</i></p>