

DOUBT THERAPY

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Doubt therapy for OCD

Self-Help on line version

In the 10-step program, you will address:

- 1.0 How OCD begins with doubt.
- 2.0 Locating your doubt.
- 3.0 Targeting the source of the doubt.
- 4.0 Exploring the reasons for your doubt.
- 5.0 Identifying reasoning errors in your OCD doubting story.
- 6.0 Seeing how you reason selectively in OCD doubt but not in other situations.
- 7.0 How OCD feels real.
- 8.0 Discovering who you really are and who you really are not.
- 9.0 Trusting your senses instead of your imagination.
- 10.0 Preventing relapse.

1.0 OCD begins with doubt

1.1 Aim

Show how Doubt therapy targets doubt as the source of OCD and that anxiety, neutralization and avoidance spring from doubt.

1.2 Content

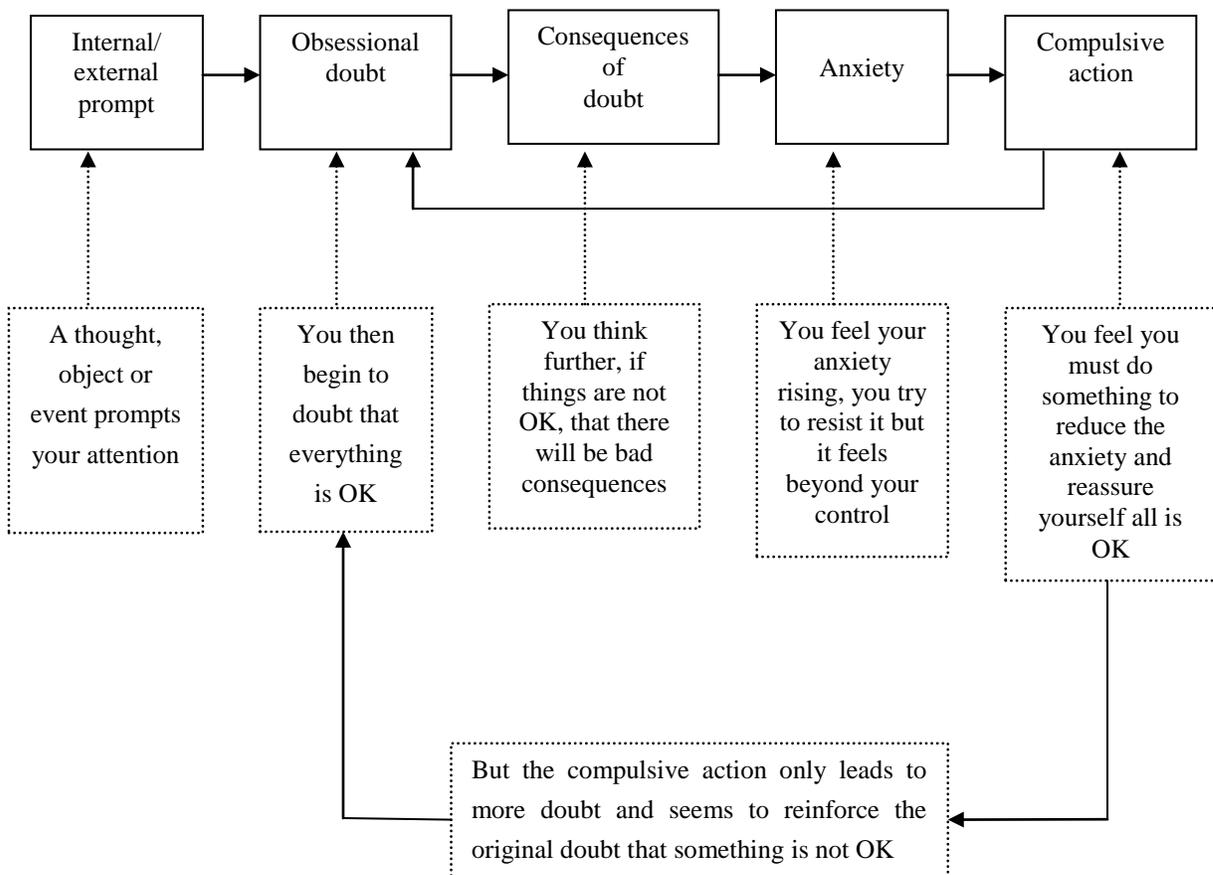
Education on the Doubt model explaining how the OCD thinking sequence comes about with illustrations.

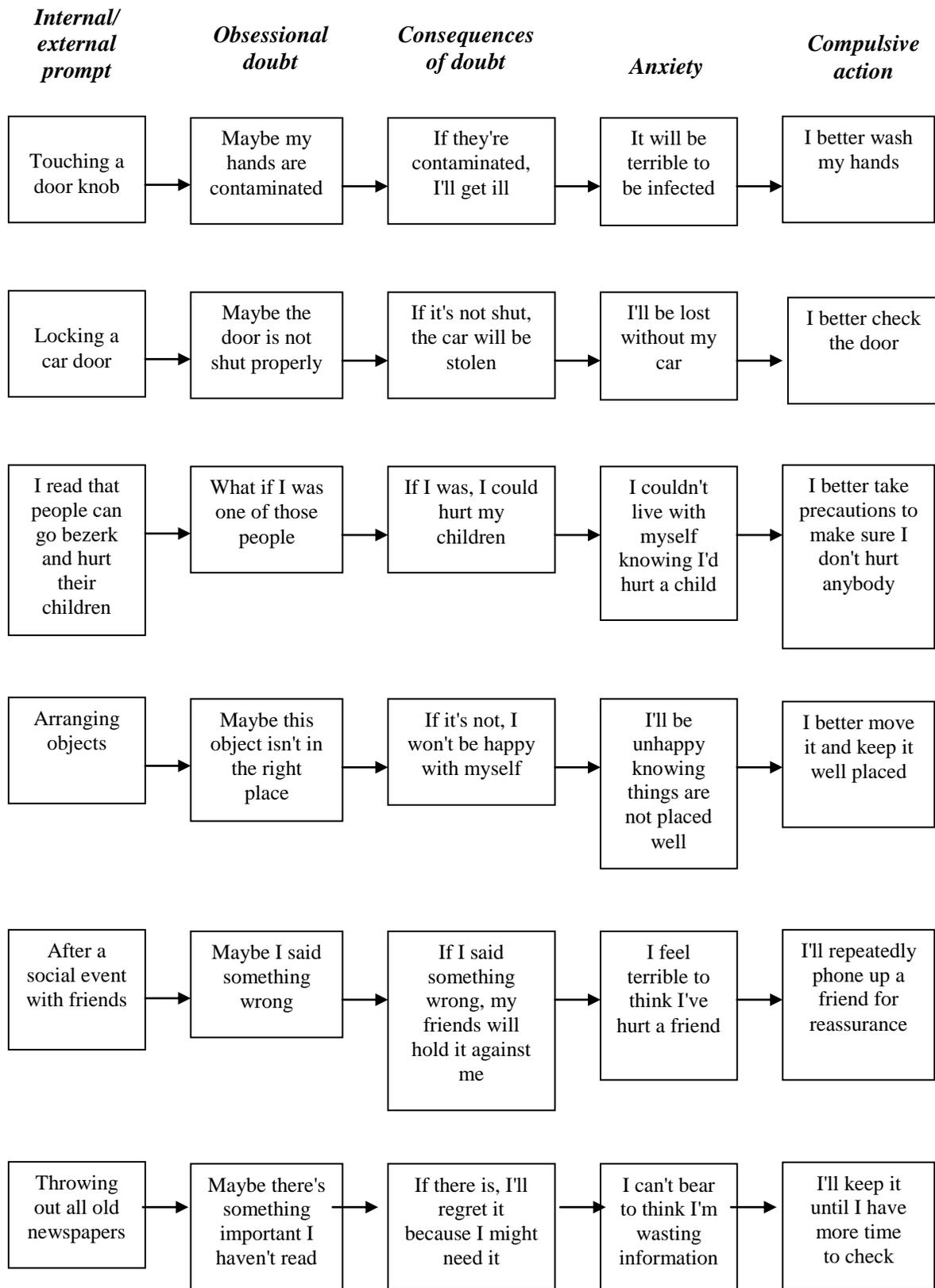
1.3 Rationale

Overview of how your OCD works and how we will treat it

Obsessive-compulsive disorder as the name implies has two components: obsession and compulsion. Obsessions are unwanted recurrent thoughts or images often alien to the self and which elicit significant anxiety or discomfort and which the person wishes to alleviate. The obsession drives the compulsion. A broad definition of a compulsion includes any voluntary, effortful, cognitive or behavioural act that is directed at removing, preventing, or attenuating the obsessional thought or the associated discomfort, or which attempts to change its presence or its content. Let's see exactly how obsessions lead to compulsions.

The OCD sequence is as follows:



EXAMPLES :

The doubt

So, OCD begins with your doubt. It is the doubt that leads you into the OCD sequence. If you did not experience the doubt, you would stay firmly grounded in the reality, in the here and now. You would not get anxious and you would not feel forced to do the compulsion.

The first point you will learn in the program is that OCD doubt is not the same as normal doubt.

In normal questioning, you instinctively look for an answer from reality using your senses. Ex. Was that bang the window closing? Is the coffee still warm?

The doubts are easily resolved by seeking evidence in the here and now, you look at the window, you feel the coffee cup. Also you accept this sense information as final.

But in OCD doubt, the opposite is the case and the questioning leads you away from reality and your senses into OCD land where doubt only leads to more doubt not to a resolution.

So now you might say “why does the OCD doubt lead to more doubt, and not to a resolution since I perform my compulsive ritual precisely in order to reduce the doubt and feel more certain?” But of course you never feel absolutely certain about the doubt even if you do the ritual several times. Why so?

The reason is that the OCD doubt is based on a subjective story which has no basis in reality. Usually what happens is that just as your senses are telling you everything is OK it jumps the doubting story with..... yes but maybe.....

In the program you will learn to distinguish between real sense information and stories, which can sometimes be difficult. Doubting stories usually begin with a "yes but maybe....."

Examples of doubting stories:

Sense information:

The door looks firmly closed..... but..... maybe

Story:

.....There is dust inside the lock which I can't see which makes it not shut properly and I remember reading about a person who thought the door was locked but then got robbed, so I better go back and check because.....

Obsessional doubt:

.....Maybe the door isn't shut, even if I know I closed it.

Sense information:

My hands look perfectly clean..... but..... maybe.....

Story:

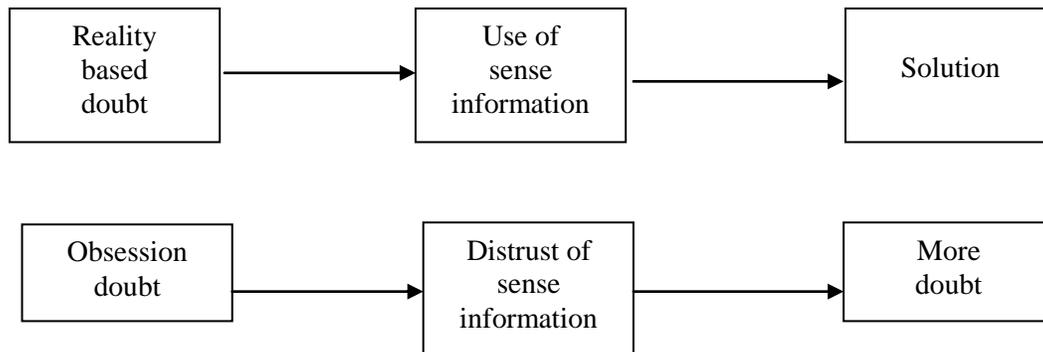
.....There were invisible germs on the pole I touched and the invisible germs might have jumped onto my skin because microbes exist and the microbes might be capable of burrowing into my skin.

Obsessional doubt:

.....So maybe my hands are really contaminated even if I see nothing.

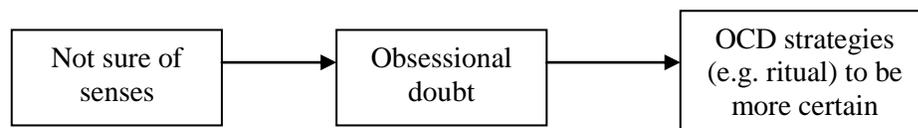
The story leads you up to believe that maybe there is something wrong in reality and that therefore you should act in reality to overcome it. But the doubt is only a story. So when you give in to the story, you are only encouraging more doubt. Which is why the more you perform the ritual the deeper you go into OCD, the less you are in touch with reality and so the more you doubt. Ironically in going into OCD land, you sometimes feel you are getting deeper into reality, but it's exactly the opposite, the more you go into OCD the further away you go from reality.

The sequences are as follows:

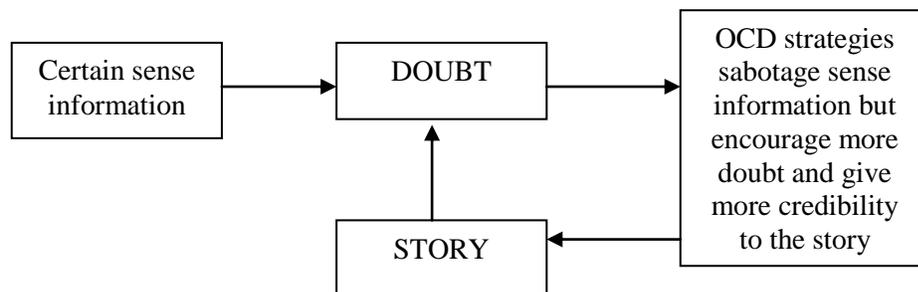


You might argue that it is exactly because you are unsure of your senses that you doubt. But our research shows it is exactly the opposite. You will learn in the program that it is only when you are certain according to your senses, that the obsessional doubt then takes over, and tells you not to be sure of your sense information. It trumps the senses and creates doubt on the basis of a good story, not on the basis of sense information.

How it seems:



How it is:



Now as we have said, you are obviously convinced that your OCD story, even though it is triggered inside your head, has a basis. If not, you would not give it credibility and you would not get anxious about it and act on it. For example, you are not afraid that a bear will attack you now. Because you do not believe there is a bear here, so you are not afraid. Your degree of belief in the story influences your level of anxiety. If you didn't believe in the story, you would not be anxious. So we need to show you how the story is really baseless and constructed on faulty logic.

In fact, the OCD is a bit like a magician leading you to believe things which are not real. Except with magicians you suspect this, but with OCD you are unsuspecting.

In the program we will look one by one at the reasoning devices in the OCD story which lead you to believe the obsessional story is possible, when actually it is baseless, in the context in which it arrives.

In the program we compare the way you reason in OCD situations with the way you reason in other comparable situations. You will see that the big difference is the way you ground your reasoning in the senses in the here and now in non-OCD situations. You don't run off with stories which import facts from elsewhere as though they are happening now. **YOU TRUST YOUR SENSES.**

In the program, we compare in detail how you deal with danger in non-OCD situations (example: crossing the road) and how this differs from OCD coping with danger because you are using your senses. So OCD takes you away from reality. You lose touch with the here and now and enter a "bubble".

But you may say..... doing the compulsive ritual makes me feel better.

Doing the ritual makes me feel better

You feel better because you have given in to the OCD. It's like giving in to someone shouting orders at you. Initially you feel less stressed. But one thing should be clear, doing the compulsive action does not make you more secure, **IT MAKES YOU LESS SECURE.** Also giving in does not make you less stressed. In the medium and long term **IT MAKES YOU MORE STRESSED OUT.**

OCD makes you more stressed because you are constantly putting in more effort than necessary and doing irrelevant actions to make yourself feel secure. But effectively,

you are working overtime for nothing and worse, all your effort is sabotaging your security, and at the end of all this, you are more anxious then when you started. That's why people often end up avoiding OCD situations. It all seems so stressful. Anticipating, preparing, all that extra attention, muscle tension, you're worn out after OCD, and yet you think OCD makes you less stressed? OCD is some salesman!!

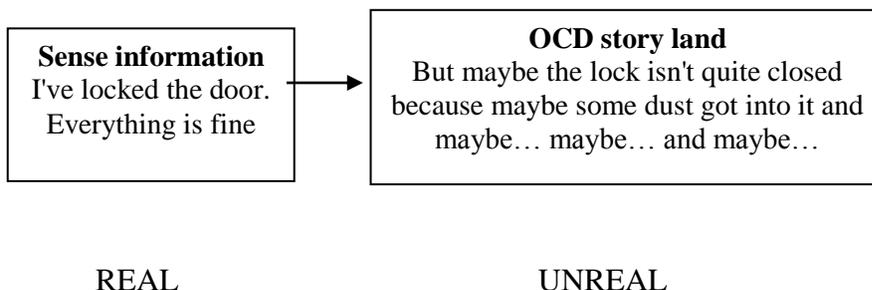
Please list here the extra efforts (mental or physical) that the OCD makes you do to be sure!

Extra actions or efforts I do in OCD situations (for example: repeatedly checking, replaying thoughts, tensing and holding to inhibit yourself):

How can OCD makes you more secure when OCD takes you away from reality? Remember you go in to the OCD spiral on the basis of a subjective doubt which is generated by a story. The more you go into OCD, the more you generate doubt, since this is the only outcome. OCD peddles doubt so it cannot give you anything else. You think you will find a solution in continuing the obsessional questioning, but mostly you just doubt more. Sometimes a rule will let you out of the spiral. Example: I've done this five times or I've put a lot of effort so it must be done. But you are NEVER more certain of real information than before you started the doubt, you are always LESS certain. The reason is because you were certain before the OCD doubt came along, but the OCD made you doubt your sense of certainty with its story. So now you are not focused on reality at all but on a story. So actually OCD is exposing you to more danger whilst you are absorbed in its story. We have met people who have ignored real dangers and been hurt because they were too absorbed in their OCD spiral.

The doubting takes you away from the here and now by making you believe a story that has nothing to do with the current context. It tells you to ignore your senses. So it is against your sense of reality that's why it's wrong.

Your senses have already told you that all is correct. In fact, your senses have given you information as they always do on the current state of affairs and which normally you trust. The OCD then goes against this certainty by creating an imaginary story. But since the original sense information was correct, it came from your senses and is real, then the OCD must always be unreal.



The doubt of course jumps in so quickly you don't realize that you were certain before it arrived. This is why in the program we get you to slow down, break up the sequence and create distance between your senses and the doubt.

How often has your OCD been correct?

What proof have you ever had that your OCD story is correct?

So why do I have my OCD?

You are probably asking why you have one subtype of OCD and not another. Please fill in your subtype here: _____. As you know there are other subtypes which you do not experience. The answer is simply that you have a theme of vulnerability which makes you more likely to respond to some prompts than others with an imaginary story. This is something you have learned usually in childhood. To discover your theme, we start again with logic. If you are afraid that "maybe" you have

made an error, then clearly you consider yourself the type of person who could make an error. At the same time a strong part of your image is that you do not wish to be seen as someone who could make an error. As we shall see in the program this negative self-conception, like the doubt it drives, is also baseless. But of course you treat it as a real possibility – you have to guard against it – and because it itself is imaginary, so it further incites the imagination. So what is your theme? To discover your theme: (1) take the content of your doubt, it always begins with a maybe; (2) This means you consider yourself the kind of person to whom this maybe could happen.

So if some one checks constantly for errors we could infer that the self-referent theme is:

“I am the kind of person who could maybe make errors without knowing it.”

So we now have a complete picture of how your doubt is produced (by the story) and maintained (by you acting as if the story was true).

The end-point of therapy is when you are able to carry out actions using just your senses and common sense with no doubting stories and no extra mental or behavioural efforts or OCD strategies. When, for example, you are able to wash your hands without the extra effort of repeating the washing several times

Your end-point in your case is to be able to:

without doing: _____

In this on line self-help program, we address all aspects of this model step by step in order to eliminate the doubt and restore confidence in your self and senses.

So to summarize: our model says you have a self-theme which makes you believe you could be someone you do not want to be and in most cases can never be. But you don't realize this and the OCD has convinced you to take precautionary measures to ensure you do not become this person. These precautions are to be hyper-vigilant for any 'danger' that could lead to you erring and confirming your feared self. This self-theme translates specifically into your thinking and behaviour, whether it be checking, washing or any other mental or behavioural compulsion. You create doubt where your senses have already given you certainty, because you are prone to doubt reality due to your self-theme. The doubt is false and goes against reality but because you act and believe in it, you make it real and all your neutralizing and testing behaviour makes it seem real. The more you go into the doubt... the more you doubt. So the aim of 'doubt therapy' is to break the vicious circle of doubt and enable you to once more trust your senses.

- Did you understand this text? Yes No
- Did it tell you new things about OCD? Yes No
- Do you find the model credible? Yes No
- Are you willing to be open minded and give the program a try? Yes No

If you answered 'no' to all these questions then maybe the Doubt Therapy is not for you.

If you answered 'yes' to at least the last question, then please re-read this first step and then consult the self help with problem solving section at the end of the program.

Thank you.

Learning point: Although the anxiety about consequences if the obsessional doubt proved true and the compulsive ritual to avoid these consequences are very preoccupying, your obsession begins with an obsessional doubt. So our aim is to eliminate your obsessional thinking and get you real!

2.0 Locating your OCD doubt

2.1 Aim

Targets discovery of personal OCD doubt through applying logic stemming from the ritual and its consequences to establish firmly the source doubt of each obsession.

2.2 Content

The person follows a recipe stemming from the anxiety provoking cue and its consequences which are neutralized by the accompanying compulsive ritual, in order to trace the source doubt. This section also covers obstacles which may impede tracing the doubt.

2.3 Rationale

Please list in the form provided each of your compulsive rituals, whether behavioural or mental, and write them down in order of how able you feel to resist performing them. Zero (0) indicates you offer no resistance, one hundred (100) means you are able to resist completely. You can mark any percentage between 0 and 100.

Now let's choose a prominent frequent ritual which you repeat regularly. If you are repeating this act (such as washing or checking or replaying thoughts) several times, it is because you are not sure it's been done right... you doubt it. Now what act are you repeating?

Client response: _____

So if you are repeating it, what are you not sure about (e.g., it's not really clean; it's not done properly; it's not correct)?

Client response: _____

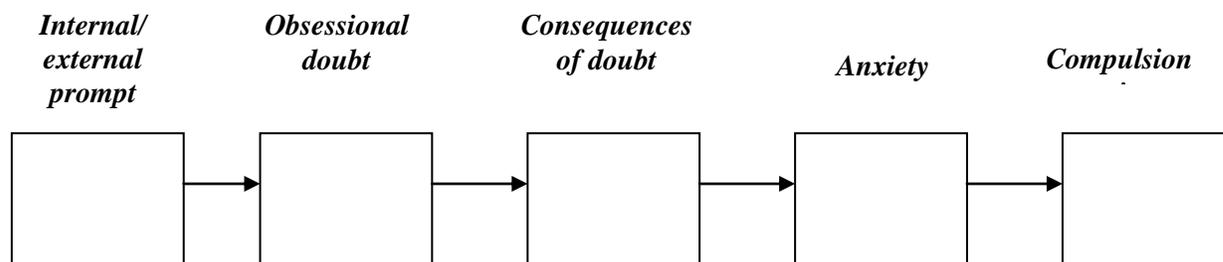
This doubt is then driving your anxiety. Also if the doubt is true, then there may be secondary consequences following on. For example, you may fear that if your hands are dirty, you will contaminate everybody and cause a catastrophe. This consequence causes more anxiety.

On the accompanying obsessional doubt sheet, please rate between 0 and 100 your degree of belief in the probability that your doubt could be true. In other words, if the initial doubt were true then what consequences will occur. Zero (0) is you really don't consider it probable, one hundred (100) means you consider it extremely probable. Please complete the form for every compulsion and its matching doubt.

Now fill in the other forms which ask your belief in the realism of the secondary consequences following on from the initial doubt. Again you can rate 0 for no realism and 100 for completely realistic.

Now choose one doubt (we suggest one which occurs frequently but which is held with a medium level of conviction) to work on throughout the program. You can always return to work on the others doubts having successfully dealt with the first. Please now fill in the logical sequence below leading from trigger to consequences for this obsession.

Your obsessional doubt



2.4 Potential obstacles

Obstacle: There is no doubt (e.g., I repeat my actions just to feel better, not for any other reason).

Solution: OK fine, but why this particular action and not another? What is this ritual neutralizing which another act will not? The answer to this gives you your clue to the obsessional doubt.

Obstacle: My ritual is automatic. I just do it. That's all... and for no reason.

Solution: Think back to when you first started the action. It may be so habitual to repeating the ritual that you have lost sight of the aim. But any complex behaviour, mental or physical, must be driven originally by a goal. So what is or was the goal of your action?

Obstacle: There is no doubt... I'm certain of it.

Solution: You may strongly believe in your doubt to the point that you think there is no doubt. But are you really certain or is it more a definite 'maybe'? Are you sure you're sure? Normally if we are certain, we don't need to repeatedly check or seek reassurance. Please look around the room you are in. Are you certain the furniture is there? If yes, now do you need to constantly check to make sure it is there? Perhaps you are repeating your compulsive action just to be sure that you're sure... in which case you are not really sure! The important point about doubt is that we must already have knowledge in order to doubt. We are doubting some wisdom or knowledge already with us. Unfortunately the more you repeat a ritual action, the more you doubt which leads to more repeating.

Have you been able to locate your source doubt for your obsessions?

Yes No

If you ticked 'yes' please progress to step 3.

If you checked 'no' please re-do step 2.

If you still cannot locate the doubt, please refer to the self-help with problem solving section

Learning point: All your obsessions begin with a source doubt and you can grade your degree of doubt for each obsession.

Participant name: _____

Date: _____

Personal efficacy scale

Please note here all your compulsions. On a scale from 0 to 100, please estimate your ability to resist the compulsions.

0 = totally unable to resist; 100 = completely able to resist

Please rate your ability pre and post doubt therapy

	Pre	Post
1. Example: checking the stove several times before I leave the house	10	80
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Participant name: _____

Date: _____

Obsessional doubts scale

Please note here all your doubts which correspond with your compulsions. On a scale from 0 to 100, please estimate how much the obsessional doubts are probable.

0 = completely improbable; 100 = completely probable

Please rate your probability of the doubt pre and post doubt therapy

	Pre	Post
1. Example: maybe the stove is still switched on	78	0
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Participant name: _____

Date: _____

Secondary consequences scale

Please note here the principal consequences following on from the obsessional doubt. On a scale from 0 to 100, please estimate how much the inferences are realistic if you do not accomplish your compulsions.

0 = completely unrealistic; 100 = completely realistic

Please rate degree of realism pre and post doubt therapy.

	Pre	Post
1.Example: If the stove is left on the house will catch fire and burn down _____	63	47
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

9. _____

10. _____

3.0 Targeting the source of the doubt

3.1 Aim

To establish that the doubt is self-created and is not justified by an outside source.

3.2 Content

Now we've identified the doubt as the origin of the obsession. The next step is to ask:

Where does the doubt come from? Is there evidence in the here and now to justify doubting what is there? Did you see, hear or feel something suspicious? Did somebody or some event authorize you to doubt?

OR

Did the doubt come from you and your intelligence because you felt you needed to go further into reality to know the truth?

3.3 Rationale

Here you have two choices and TWO CHOICES only. Either the doubt is justified by outside evidence OR you have created it by yourself.

- (1) If the doubt is based on real evidence out there in the 'here and now', then where is the real evidence. Evidence includes anything you can see or hear or feel or smell right now in your immediate environment. This includes reading notices or being told by someone or by an authority or through sensing a problem relevant to the here and now. We emphasize relevant since as we see later, evidence irrelevant to the here and now is not helpful. So locking a door and hearing or feeling something strange would count as a valid reason to doubt if the door is locked. As opposed to locking a door, sensing nothing wrong and then doubting a few minutes later that there could be a problem. Listening to a

friend on the telephone and experiencing difficulty hearing due to static would lead to genuine uncertainty about what the friend said. But when you hear a friend clearly and then later doubt whether you really heard, the doubt is created by you.

OR

(2) Did it come from your own ideas or personal hunch? Did you make up a story to justify your doubt? Maybe you thought you could not be sure of your senses or common sense since something could be wrong or there could danger without your knowing or detecting it and you want to be sure. After all, one never knows!! Stuff happens outside your awareness and you might feel you need to go deeper to find out what is there.

So which is the source of the doubt?

The environment and your senses OR you and your imagination?

3.4 Obstacles: But it could still be true

Solution: You might argue that even if the doubt is created by you and comes from your intelligence, that it could still be right. Absolutely. But here at this stage we simply wish to identify if the doubt at the moment you experience it comes from inside you or whether it is based genuinely on evidence from outside.

Obstacles: Confusing doubt with trigger

Solution: Be careful not to mix up the trigger with the doubt. Seeing a door knob is a real perception from outside but the doubt that it is dirty, when your senses say it's clean, is coming from you, not the door knob.

Are you agreed that your doubt is self-created... rather than coming from real evidence in the here and now coming from out there?

Yes No

If you ticked 'yes' please progress to step 4.

If you ticked 'no' please re-do step 3.

If you still tick 'no' please refer to the self-help with problem resolving section.

Learning point Typically in OCD doubt arrives after your senses and common sense have told you nothing is wrong. It is created by you and not based on evidence in the here and now.

4.0 Exploring the reasons for your doubt

4.1 Aim

To establish the reasoning narrative justifying the obsessional doubt.

4.2 Content

The person is introduced to the notion that there is a story convincing the person to doubt.

The story is invented but persuasive. The story goes against the senses. But it is just a story which can be reversed.

4.3 Rationale

OK, so now we've established that the obsessional doubt comes from *you*. You create the doubt... you think justifiably... because for one reason or another you consider it necessary to go beyond your senses.

So let's examine these reasons. Let's take your target obsession. Firstly, let's establish what your senses and common sense say is there when the obsession occurs. Pretend you don't have OCD... or that you are in a non-OCD situation and you are just relying on your senses and common sense. What do your senses and common sense say is there in reality in the OCD situation (before you doubt)?

Client response: _____

Does your sense or common sense about reality indicate there is any observable danger in the here and now?

Yes No

If the answer is ‘yes’ in all likelihood you are either not identifying an obsessional doubt or you are going beyond the senses to what danger you think *could* be there, or, you are not describing an OCD situation with obsessional doubt.

Please try again.

You ticked ‘no’? OK. So your senses and common sense have given you sufficient information that in reality there is no reason to doubt. But nonetheless you doubt if you sensed everything.

To show that you do already possess knowledge from your senses and common sense that there is no danger and which goes against the OCD, ask yourself the following question. ‘How much would I bet that I really did ‘leave the door open’, ‘make a mistake’, ‘say the wrong thing’, ‘contaminate myself’? ‘If I were forced to bet all my money would I bet on my own OCD doubt being true or false?’

Client response: True False

Most people with OCD if forced to choose between OCD doubt and the senses and common sense as to which better reflects the real, choose sense of reality rather than the doubt about what is sensed. But of course you will feel that there is still the slight possibility that the doubt could be valid.

This exercise emphasizes three important facts: (1) You already know what is there in reality. Your senses have informed you about what is really out there. (2) If you didn’t have OCD you would probably carry on relying on your senses. (3) The doubt goes exactly against your senses. It says the opposite of what is really there, since your senses confirm nothing is wrong.

Let’s look at why the OCD doubt convinces you to go against reality. Let’s make the OCD talk and justify itself. Ask your OCD to justify itself.

Examples: How do you (& your OCD) justify your doubting when your senses say all is well and good? Let's take your target obsession.

Client justifies doubt: _____

In our study of OCD stories we have found that most OCD justifications fall into the same few categories. The story is a collection of hear say, out of context facts, imagined ideas, mis-associations or wrong headed assumptions, or trying to go beyond and further into reality. The story does not reflect reality in the here and now. Let's look at John's story.

John's story about why he doubts his door is locked

Well, I always worry about the door being properly locked. I close it very carefully, paying attention to every action. The click of the latch, the resistance of the door when I push it shut. But I still doubt if it's really closed. I think of a door I once saw swing open after the person thought they'd locked it, and well I'm not an expert on locks and some can spring open automatically. My friend had a garage door once which just opened in the middle of the night. Mind you that was an electric lock. When I test the door, it seems shut but I don't know how shut is shut. I mean how much movement is allowed. Of course, if I was robbed because I left it open, I'd feel terrible.

John's story is a good example of an OCD story justifying the doubt. Now the first point to note is that all of the reasons given by John relate to other times and other places. None relates to what he is observing in the here and now. Obviously the story can't be relating to the here and

now because his senses say all is OK in the ‘here and now’ when he locks his door. But he feels justified in drawing on events he has heard about second hand, connecting up completely different events and imagining sequences. All of which make him ‘doubt’ what he is actually seeing in the here and now.

Do you think John is justified in doubting because of these reasons? You might say yes because sometimes we need to rely on our ‘intelligence’, ‘know how’, or ‘memory’ despite the fact that these came from us, not from the outside. For example, if I’ve read somewhere that one area of a town I’m visiting is dangerous, I might be wise to avoid it even though I have no evidence in the ‘here and now’ that it is dangerous. If I ‘know’ that every time I leave the house with more than three accessories, I’m likely to lose one of them. It may be a good idea to take precautions even though there is nothing lost in the here and now. If I know I’m prone to slip on ice, then it might be sensible to watch out when I walk on ice even if I’ve not already fallen. All these ‘reasons’ for caution are valid since either they are based on real information from outside sources applicable to the here and now, or I have had direct experience of them in identical situations. The reasons do not come from second hand information, hear say and invented stories.

Now let us return to John and then to the justification for your own OCD doubt. Is John’s story based on facts related to the here and now or on justifications remote from the here and now? Don’t forget, relevant means that your knowledge about what could be there is drawn from evidence/authority/experience based directly and immediately on the current case.

As an exercise, say which of the following is based on the direct evidence justifying the doubt in the here and now that ‘maybe the door is locked because...’

1. “This lock is old and sometimes jams and fails (in reality) to lock the door.”
2. “I read about someone who left the door open.”

3. “It could be a statistical probability that I leave the door open.”

“Maybe the door knob is contaminated .because...’

4. “Microbes exist so my hands could be contaminated.”

5. “I touched a knob which I saw had mud on it.”

6. “It’s common knowledge you can catch germs from other people.”

The correct answers are **1** for the first example & **5** for the second example.

Please check that your answers were correct. If they were incorrect please re-read step 4 from the beginning and try again.

Please write down your own story behind your obsession. It will begin with:

Maybe..... _____

4.4 Potential Obstacles: If you have difficulties producing the story, the following prompts are useful.

Obstacle: No justification

Question: I can’t think of any reason, it just seems reasonable to doubt.

Solution: OK but don’t forget, your senses have told you all is well, yet you go against the senses. You don’t do this in all situations. So, why here?

Question: Well it just seems right to doubt.

Solution: Why is doubting right in this case?

Obstacle: False justification

Question: Well, it could be dangerous, it's safer to doubt.

Solution: How could it be dangerous if you don't doubt?

Question: Well, it's a possibility... it could be.

Solution: Who or what says it's a possibility?

Obstacle: Maintaining the idea that the obsessional doubt is a real possibility

Question: Well it could happen.

Solution: But how precisely can it happen in the here and now? I mean ceilings collapse in houses but you're not worried about the ceiling in the room now collapsing?

Question: No because there are no signs that it will.

Solution: So why invest in these OCD possibilities when there is no sign now that it will happen?

How to change John's story

Take each idea in the story and replace it with an opposing and realistic relevant idea in the here and now. So John's doubting story begins with: "I still doubt it is really closed." So this can be changed to: "When I hear the click of the latch and the resistance of the door I know it is pushed shut." He goes on to make an irrelevant association with a door he saw swing open. This association can be replaced with: "Every other time I have locked the door, it is always stayed shut." "This lock is a solid lock, so it's not shaky and these locks work on clear mechanical principles."

Changing your story

Now change your own story in the same way by changing elements one at a time in the OCD story for more realistic elements in the alternative story. Reverse the story by changing all the elements to say the opposite.

OCD story:

Alternative story

‘I doubt the door is closed’ ‘I heard the click and felt the latch’

‘the door could swing open’ ‘Every time I lock the door always stays shut’

The non-OCD story can be built up in bits and pieces, a bit at a time, a sentence or an assertion at a time. Replace every speculation in your story with another piece of ‘information’ which goes against the OCD idea and which is more based in reality. Then join up the different statements to make a continuous story

OCD Story

Alternative Story

Element 1: _____

Element 2: _____

Element 3: _____

Element 4: _____

Now join the elements together to make into a story and repeat this new story to yourself.

How do you feel? The aim of the exercise is to help you realize that the OCD story is only a story. Are you convinced the OCD story is the only story?

Do you agree that your obsessional doubt is backed up by a story which is generated by you?

Yes No

If you ticked 'yes' please progress to step 5.

If you ticked 'no' please re-do step 4.

If you still tick 'no' please refer to self-help with problem solving problem section.

Learning point: The OCD justification for your doubt is just a story. Like other stories, it is not a fact...it is just a story.

5.0 Identifying reasoning errors in your OCD doubting story

5.1 Aim

To reveal how the OCD story contains numerous reasoning errors which make it an invalid basis for doubting.

5.2 Content

The OCD story is analyzed to reveal the way in which it mixes up facts and associations, and makes irrelevant links between past and future, and leads off into imaginary spirals.

5.3 Rationale

Marlene's story

No way would I touch a pole in the metro even if I saw it was clean. It could still be dirty. You have no idea who has touched it. Even if the people in the metro look respectable you can never tell what they do. I'm sure some don't wash, and anyway so many people touch the pole, there must be an infection lingering around which I could catch. Don't forget, microbes are invisible and you can't see them. I imagine them crawling all over the pole and getting inside my skin. Just imagining them makes me feel like I need to wash. Yuck, no way would I let that happen.

What is Marlene's doubt?

Going through Marlene's story is her fear of the pole grounded in what she actually senses in the here and now about the pole.

Is the pole visibly dirty?

Yes No

Does Marlene make assumptions, for example, about people using the metro?

Yes No

Does she wheel in abstract facts not strictly relevant to the here and now?

Yes No

Is her imagination feeding her doubt?

Yes No

Are her justifications remote from the here and now OR relevant to the here and now? How so?

Client response: _____

Why do these reasoning devices invalidate Marlene's story? Is it because she is not basing any inferences on facts in the here and now?

Yes No

Has she really considered whether her assumptions about people are true, and whether the associations and related facts she talks about apply in the here and now?

Yes No

For example, she says invisible microbes exist which is true but how is it she is not afraid to breathe them in, and ignores the fact that, anyway, her skin protects her. Finally, she makes herself even more anxious by going into an imaginary sequence which she made up pure and simple.

So do you believe Marlene is justified in doubting?

Yes No

If you ticked 'yes' please move on to the next section of this step.

If you ticked 'no' please re-read the step 5

Now take your own OCD story and write it out at length. Analyze it in the same way that you analyzed Marlene's story to see if your story has the same faulty reasoning devices which invalidate it:

OCD story:

Are you agreed that your OCD reasoning story shows similar reasoning faults to Marlene's story?

Yes No

Which faults: _____

If you ticked 'yes' please progress to step 6.

If you ticked 'no' please re-do step 5.

If you still tick 'no' please go to the self-help with problem solving section.

Learning point: The OCD story contains reasoning errors which invalidate it. The moment that the story begins is the moment you leave reality and logical reasoning behind you.

6.0 Seeing how you reason selectively in OCD doubt but not in other situations

6.1 Aim

To make the person aware that the reasoning in OCD is selective to certain areas of life and that the person uses another type of reasoning in other areas.

6.2 Content

Person undertakes exercises to establish how they reason in other ‘dangerous’ but non-OCD situations and activities, such as crossing the road. The person reflects on why there is no OCD ritual necessary in non-OCD situations, and also learns about the inefficient self-sabotaging nature of OCD reasoning.

6.3 Rationale

There are some peculiarities about the OCD story. It contains errors of reasoning which you don’t apply when you reason in other areas of life. You don’t reason in OCD situations like you do in other walks of life, you do not rely on stories of what ‘could be’ in preference to your reality sensing of what is there.

The next question is: Would you apply OCD reasoning to other areas of life where currently you don’t have OCD? What happens when you do?

Let’s take crossing the road, an everyday potentially dangerous activity. You look right, you look left, you look right again. You see no cars coming. So do you think it’s safe to cross the road based on your senses? What is your confidence ___%

NOW what if we concoct a story to make you ‘doubt’?

“You see nothing but maybe there is a car backed up in a back alley, and you’ve seen a film where a person was knocked down by a car suddenly coming out of a building. It’s well

known that cars can appear from nowhere and be straight on top of you in no time. Several reports in the paper show people could be knocked down to due blind spots.”

How do you feel about crossing the road now? Perhaps just a little less confident. Please rate your degree of confidence ____ %

Of course, unless your OCD theme is about crossing the road, this new doubt will not stay around. But this shows how you can create an OCD-type doubt with just a story. This point is important. Your justification is only a story... not a series of facts. How do we know this? Well if we change the story, we change the OCD and we do this without changing reality or facts....but by changing the story.

Are you agreed that your reasoning in OCD situations is not the same as in other situations??

Yes No

If you ticked ‘yes’ please continue to sep 7.

If you ticked ‘no’ please re-do step 6.

If you still tick ‘no’ please refer to the self-help with problem solving section.

Learning point: You reason in OCD situations in a distinct way to other non-OCD

situations where you are content to trust your senses.

7.0 How OCD feels real?

7.1 Aim

To discover how OCD doubt which is generated in the imagination attains a reality status through the person's actions.

7.2 Content

The person is encouraged to examine all the compulsive actions performed due to the OCD doubt and how these actions, including avoidance or testing behaviours, give the OCD reality status since they produce real events and reinforce the credibility and reality value of the story.

7.3 Rationale

Every time you act on your doubt in the real world, you are giving your imaginary doubt a reality value. You are making it seem more real because obviously if you act in reality, your actions have real consequences. These compulsive actions include the compulsive rituals repeating actions, scrubbing, washing, staring. But they also include avoidance and hyper-vigilance for OCD danger. It's a vicious circle, the more you feel you should do to be safe, the more safety behaviours you feel you must do. If you acted and got anxious, there must be something to act on and get anxious about... mustn't there. Otherwise why would you act?

The imaginary doubt can have a real impact on your life, if you avoid certain places, test out your doubt and let it run your life. Testing is a good way to bring a doubt alive, give it oxygen and seemingly confirm its reality.

For example: your doubt says: "Other people might be staring at me because I look stupid." So you say: "I'll stand in the middle of the room and look around" You feel uncomfortable and you note others looking back at you which you interpret as proof of the doubt.

Another testing example: your doubt says you could have pornographic thoughts so you deliberately evoke such thoughts to show they could happen, hereby making the doubt real.

Please note here the compulsive actions (other than rituals) (examples: avoidance, vigilance) or the testing behaviour that you perform which makes the OCD real.

Do you agree that, although OCD is imaginary, you make it real through performing compulsive activities and testing in reality?

Yes No

If you ticked 'yes' please continue to step 8.

If you ticked 'no' please re-do step 7.

If you still tick 'no' please refer to the self-help problem solving section

Learning point: OCD only gets real because you react to it by changing reality or by testing reality. Otherwise it would stay unreal and imaginary.

8.0 Trusting your senses instead of your imagination

8.1 Aim

To enable the person to return to normal reality sensing in the here and now without OCD excessive effort.

8.2 Content

Person is taught to rely on senses exactly as is done in non-OCD walks of life. The person is shown how reliable and safe the senses are through acting normally in the situation and allowing senses to operate by default. The person may feel initially insecure in the absence of extra effort and vigilance, but soon realizes the space is filled up with their own confidence.

8.3 Rationale

Reality sensing is natural and does not require additional effort, only your presence in the world. You may feel you are doing all you can with special efforts to stay in reality, for example, paying extra attention, focusing on detail... but this is exactly the problem. By putting in extra effort you are reinforcing the doubt that you need to put in extra effort because you can't trust yourself.

Now combining steps 6,7,8 you should be able to practice going into OCD situations and using your senses in the normal way, as you already use them in non-OCD situations (example: crossing the road).

Please list the OCD situations linked to your targeted obsession here.

Reality sensing means tuning in with the requirements of the task in the here and now and using senses in the normal way. If the doubt tries to creep in as you are dealing realistically with your OCD situation, you dismiss it as irrelevant and carry on with your goal. Example: If you shower two hours per day because OCD says “maybe it’s not all clean”, you now shower until your common sense says you are clean, and you do not continue on the basis of a doubt. If you lock your door and it seems fine, you go on your way and if a doubt comes along, you dismiss it.

Now one by one enter and leave these situations by reality sensing in the normal way.

Please rate your confidence on reality sensing in each situation from 0-100.

Please practice the reality sensing until you feel comfortable in all OCD situations and are at least 80% confident.

Have you grasped sensing reality in OCD situations like you do in non-OCD situations?

Yes No

If you ticked ‘yes’ please continue to step 9.

If you ticked ‘no’ please re-do step 8.

If you still tick ‘no’ please refer to the self-help with problem solving section

Learning point: Reality sensing requires natural use of senses in everyday life without any special effort.

9.0 Discovering who you really are and who you really are not

Reposition the person towards authentic self

9.1 Content

Explore the contrast between the OCD self and who the person really is. The authentic self attributes are built up and compared to the OCD self theme which the person fears s/he could become.

9.2 Rationale

Why do you suffer from your specific form of OCD? The answer is that we all have a vulnerable self-theme or themes which make us more likely to react and be sensitive to some ideas and not others. These themes relate to who I think I am as a person and what could happen specifically to me. For example, if I know I'm a bit clumsy, I might take extra care in a China shop and I might take extra notice of warnings to be careful.

The problem with the OCD self-theme is that, like other obsessional doubts, it arises through confusion. The person thinks s/he could be or could become a self they definitely are not because the OCD has led them up to doubt who s/he really is... which is the authentic self. The OCD does this by spinning an OCD story about the kind of person someone could be using the same reasoning errors noted earlier for the OCD story in step 6. The answer here is to work against OCD and establish your real self by discovering how you act and think in real life. We can only know our real selves through our acts, gestures, deeds in real life.

What is the OCD feared self you are afraid you will become? Look at the collection of doubts you noted in the clinical scale in step 2 measuring 'maybes'. If you noted that: "Maybe I could harm myself", then OCD has convinced yourself that you could be a harmful person. If you noted: "Maybe I could be dirty", then OCD is convincing you that you could be a dirty person.

Please note down here the OCD self which, according to OCD, you could become on the basis of your doubts.

Example: OCD makes me doubt if I could hurt someone unwittingly.

In my case the OCD makes me doubt whether I could be

Example: Therefore OCD tells me I could be the sort of person who is violent and aggressive but not be aware of it.

In my case OCD tells me I could be the sort of person who

But is this OCD self true OR are you really the opposite of the OCD self?

Note down here instances in real life where you perform as the OCD says you could perform.

When exactly have you appeared:

Harmful: _____

Careless: _____

Negligent: _____

Error prone: _____

Other OCD self traits: _____

Are you really in danger of becoming the feared self OCD says you could be? Or has OCD tricked you into believing you could be someone you are not and cannot become, when this OCD self is *against* your real self?

Your real attributes are shown by how you behave and react in real everyday life.

For example if you open a door for someone this is a sign of courtesy.

If you extend help to a friend this is a sign of caring.

If you carry on with a job this is a sign of persistence.

So a person who showed these traits would be described as a courteous caring persistent individual.

Other people's view of you can also help discover the real you. Other acquaintances will base their opinion on what they see and know about you. If you ask friends or family their perceptions of you, each one may mention a different trait which can help you build up your view of all aspects of your self in reality.

Of course you may have good and bad attributes as does everyone, but they will nonetheless allow you to build up a picture of your real self,and for sure since OCD is always wrong, the traits will not be the ones OCD says you could possess.

Write down here qualities of your real self that you have shown in everyday life:

Write down qualities of your real self provided by others:

Looking at your qualities how do they compare with the OCD self theme which OCD had you convinced you could be:

Do the two correspond to each other?

Or is the real self the opposite of the OCD self?

Which is your real self? The OCD or your authentic self?

Which self is better for predicting your future acts and abilities?

9.3 Obstacle: But if it weren't for my extra vigilance and OCD rituals, I might become the feared self.

Solution: OCD has simply told you a story of who you could be... it's another obsessional doubt.

9.4 Obstacle: but maybe in the future I could become the OCD self.

Solution: There is no proof you would ever become this feared OCD self. All your actual attributes as enumerated by you earlier are the opposite of the possible self OCD says you could be. Doubting who you are because of OCD is itself another obsessional doubt.

Have you identified your real life self?

Yes No

If you ticked 'yes' please continue to step 10.

If you ticked 'no' please re-do step 9.

If you still tick 'no' please refer to the self-help with problem solving section

Learning point: My authentic self I know through my accomplishments in the real world and it is the opposite of my feared OCD self.

Your real self tells you there is no need to doubt or be vigilant or to undertake precautions or rituals in the way OCD says you need to.

10.0 Preventing relapse

10.1 Aim

To encourage the person to continue with reality sensing and normalization of behaviour in OCD situations.

10.2 Content

Exercises are discussed to help the person to continue in repositioning the authentic self. The repositioning is reinforced through constantly receiving feedback in reality from real attributes; continuing to separate the positive experiences of the real self from the negative experiences of the OCD self; reorienting actions away from avoiding becoming the feared self towards exploring and expanding on the authentic self.

10.3 Rationale

- Foresee stresses which might affect your insecurity and invoke your OCD self theme.
- Plan ahead for any life events or occurrences likely to touch your sensitive OCD self theme.
- Carry on with the repositioning exercises where you act according to your real self which are a work in progress.
- Try to initiate non-OCD activities which give you feedback on your real self.
- Consider yourself non-OCD and build your life and activities around your real self.

Three criteria to identify whether a thought is an obsessional doubt:

- It takes the form of a DOubt.
- It evokes a Negative emotion.
- It corresponds to your OCD self Theme.

If the thought meets all three criteria, DON'T go into it.

How much of you and your life is now non-OCD %?

If it is less than 80%, you may profit from repeating the program steps to see where you are still caught up in OCD.

Learning point: Becoming non-OCD is a question of continuing to put in practice doubt therapy principles. Eventually it will seem normal not to suffer OCD.

SELF HELP WITH PROBLEM SOLVING SECTION

Firstly please identify your problem within the step. Does it concern:

- 1. Understanding**
- 2. Completing an exercise**
- 3. Disagreement with model.**

1. Understanding.

Please reread the step carefully and slowly and highlight the section or phrase you do not understand.

Ask yourself what exactly you do not understand in this part.

Think of several alternative meanings of what could be meant in the light of the rest of the program.

Recap on the parts of the text you understand and try to fit the part you do not understand into your overall understanding.

Ask a friend or other trusted person for their understanding.

2. Completing an exercise.

Identify exactly why you cannot complete the exercise.

Most exercises follow on from previous ones, so go back to the previous exercise and see how logically the current one follows from the previous one.

Ask yourself what would be the next step logically at this point in the program.

Take a break and then reread the exercise and try again.

Request help from a trusted person.

3. Disagreement with the model.

Are you disagreeing with a part or all of the model.

Ask yourself why you agree with other aspects but not this aspect.

Play the therapist and imagine you are presenting the model in a positive way to yourself.

Ask yourself in what circumstances could you agree with the model?

What conditions would need to be fulfilled by your OCD for you to agree.

Are these conditions ever likely to arise or to at least arise in part.

Thank you for your problem solving.

CONGRATULATIONS YOU HAVE NOW COMPLETED THE 'DOUBT THERAPY'

If you have successfully dealt with one obsession you can now apply the program to other obsessions. You need only return to step 2 and begin again.