



An Introduction To The “Over-Active Conscience”: Understanding Scrupulosity & Obsessive-Compulsive Disorder

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At times in life, all of us go through times of spiritual struggle such as dealing with guilt, doubt, or confusion. While there can be numerous reasons for these experiences, they are commonly due to:

- (1) Dealing with circumstances that are painful and difficult to understand (e.g., the death of a child)
- (2) Times when we have not been diligent in the Word, prayer, attending church, etc.
- (3) Times when we have not dealt with a “heart” issue such as pride, un-confessed sin, etc.
- (4) Times when we do not understand Scripture well enough to discern how it applies to our lives.

While at some time or another all of us have experienced the things listed above, a smaller percentage of individuals deal with anxiety about spiritual matters that extends beyond what is commonly experienced. While these individuals may initially appear to have concerns similar to those of most people; upon closer examination, it becomes evident that they are dealing with a mental health issue that has become intertwined in their spiritual beliefs. **Please note: This article is not intended to suggest that having a spiritual struggle automatically means someone needs treatment by a mental health professional.**

SCRUPULOSITY [Pronounced: skroo-pyuh-los-i-tee] is a word that many people have never heard before. However, as you read through the case vignettes below, you will see that you have probably encountered scrupulosity either in yourself or someone that you know. While all of the cases below describe situations commonly dealt with at Apostolic Christian Counseling & Family Services, in order to protect the confidentiality of our clients, all of the cases below are fictional composites.

Case #1 “I didn’t repent right.” A 60-year-old Brother, who has served the Lord faithfully for decades, is tortured by the unrelenting thought that he “didn’t repent right” over 40 years ago. He has discussed his concerns with his Elder (and other Elders) on dozens of occasions, but still does not feel relief. Even though all the Elder Brothers have assured him that there is no need for him to worry, he cannot escape the thoughts and has become deeply depressed.

Case #2 “I can’t feel peace.” A young convert struggles with the concept of “having peace” prior to her baptism. While her parents, friends, and Elder all believe that she is ready to proceed with her testimony (on the basis of her faith, knowledge of the Word, and converted lifestyle), she just doesn’t “feel right” about it. She knows of no un-confessed sin or unfinished restitution that would prevent her from moving forward. However, every time she starts to feel peaceful she is quickly overwhelmed by doubt, worry, and fear that she might not “have peace.”

Case #3 “I have blasphemous thoughts.” A middle-aged Sister is praying by her bedside and is asking the Lord for wisdom and guidance in her life. All of a sudden the thought, “maybe I am actually praying to Satan,” flashes across her mind. She tries to undo the thought in her head by repeating to herself, “in Jesus’ name I pray; in Jesus’ name I pray; in Jesus’ name I pray” over and over. The more she tries to block out or undo the thoughts, the more distressed she becomes. Eventually, she is constantly bombarded by these “blasphemous thoughts.”

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Case #4 “I feel unworthy to take communion.” Each year, just prior to communion, a Sister becomes anxious and frantic in her attempt to make sure that she is pure and won’t take communion unworthily. She repeatedly worries that she might have “offended” someone, but isn’t sure who or when this might have happened. The closer it gets to communion, the more possible “offenses” or “sins” flood her mind. Her solution is to call all of the people that she can think of that she might have offended in some way. Each time she talks to someone about her concerns, she gets the same response: the people report that the issues she is bringing up are so small and insignificant that they never even noticed. The night of communion the Sister attends, but does not partake, because she is worried that she might have forgotten to go back to someone, even though she doesn’t know who that would be.

Case #5 “I need to confess... again.” A Brother goes to visit his Elder to confess... again. The Elder kindly asks what is on his mind. The Elder is surprised to find that the issue is exactly the same thing that the Brother has confessed time and time again. The Brother says, “When I was here the last time, I think I might have left something out. I don’t think I did, but I want to be sure.” The Elder has heard this exact confession many times and, again, tells the Brother that God has forgiven him and that he should move on and stop worrying about it. The Brother leaves the Elder’s house feeling relieved. One week later, the Brother goes to see the Elder again and confesses the very same thing.

Case #6 “I’ve committed the unpardonable sin.” “I think I’ve committed the unpardonable sin and I have no hope” says a Brother in tears. His Elder tries to calm him down and says, “Tell me what you mean; why do you think you’ve committed the unpardonable sin?” The Brother says, “I’m not exactly sure that I did. I just feel like I might have. Since these thoughts keep coming to me, I must have done it!” No matter how much reassurance the Elder gives, and no matter how much reasoning from the scriptures is done, the Brother cannot escape the thoughts. He is now starting to feel despondent and wonders, “If I am condemned to Hell anyway, why try?”

Case #7 “I see blasphemous pictures in my thoughts.” A young Brother comes to his Elder so ashamed that he can’t even look the Elder Brother in the face. The Elder compassionately says, “What brings you here tonight? Whatever it is, with God’s help, we can work through it.” After several attempts to say what is on his mind, the young man says, “I’ve been having sinful sexual thoughts.” The Elder has heard many confessions and assures him that this can be worked through. “No, my thoughts aren’t like everyone else’s,” the young Brother says. “Every time I sit in a church service, read my Bible, or pray I see an image in my head of me having sex with the virgin Mary. Does this mean that my faith is really in vain?”

Case #8 “I worry that I’m going to say bad words.” A Sister fears going into the church sanctuary because she worries that she will blurt-out obscenities and cuss words in the middle of the sermon. As she is talking with another Sister over lunch, she starts to wonder if she just cussed out loud. She doesn’t think she did, but she isn’t sure. She carefully reviews everything that she said in order to make sure that she didn’t say something wrong. She decides that she should not go into the sanctuary for the service so that she isn’t in a situation where she might shout out cuss words and “profane the name of Christ.”

Case #9 “Did I just lie?” A middle aged Brother is repeatedly tormented by the thought that he might have just lied. He constantly feels guilty and worries that he may be in danger of hell. Earlier in the day, a coworker asked him if he knew what the weather was supposed to be like the next day. He told the coworker, “It’s supposed to be sunny.” However, after leaving work, the Brother is tormented by the thought that he might have lied to his coworker when he remembered that the forecast said it was supposed to be “partly sunny” and not just “sunny.” The Brother worries and worries about ‘deceiving’ his coworker. At 11:45 p.m. he calls his coworker (who was already asleep for the night) to apologize and to tell him that the forecast was supposed to be “partly sunny” and not “sunny” as he had said earlier.

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Case #10 “What if my motives weren’t pure?” “I think I might have just lied to the Holy Spirit” says a Brother to his Elder. This man is constantly worrying about his “TRUE” motives. “What if I didn’t ‘REALLY’ mean it when I told God in my prayer that I loved Him. Did I ‘REALLY’ mean that I love God with ‘ALL’ of my heart. I think I do, but what if I don’t love Him with ‘ALL’ of my heart? Worse yet, what if I ‘WILLFULLY’ told God that I love Him with ‘ALL’ of my heart but I ‘REALLY’ didn’t? If I’ve sinned willfully, does it mean that I’m lost for all eternity?”

Other Symptoms and Manifestations: The cases listed above are *only a few* of the ways that scrupulosity is manifested. In addition, it is quite common for people experiencing scrupulosity to also worry about other things such as committing aggressive (e.g., thoughts of harming a baby, hitting a pedestrian with a car, urges to hurt a weak or defenseless person) or sexual acts (e.g., fearing that one will molest a child, worrying about being gay). These people often feel very ashamed and hide the thoughts from others (“they will think I’m crazy” or “they might take my children away from me”).

THE NATURE OF THE PROBLEM

The people in the above situations are all in distress. In addition, at first glance, it appears that they are all trying to solve a spiritual problem. While it is true that these people are experiencing emotional and spiritual distress, this distress is a symptom of the problem and not the problem itself. These people are dealing with a mental disorder called **Obsessive Compulsive Disorder (OCD)**.

At times, some of these symptoms may be caused by clinical depression. In addition, it is quite common for depression to occur along with OCD. Less commonly, these symptoms occur in individuals diagnosed with schizophrenia and related psychotic disorders.

Please remember that all of us may temporarily struggle with a spiritual issue and that going through such a struggle does not necessarily mean that a mental disorder is present. However, if you review the cases described above, you will find that the problems described were not simply “minor” or “passing” struggles. Rather, the issues described above caused intense distress and the individuals were unable to resolve the problems even though they all tried to find a way to deal with their anxiety.

OCD is a mental disorder that is characterized by obsessions and compulsions. The *clinical* term, obsession, means something completely different than the popular use of the term. The popular use of the word obsession means that someone really, really likes something, whereas the clinical use of the word obsession means almost the exact opposite.

Definition of Obsessions¹: Recurrent and persistent thoughts, impulses, or images that are experienced as intrusive and inappropriate and that cause significant anxiety or distress. By definition obsessions are:

- **Intrusive** – obsessions can occur at any time – usually at the exact time that the person does not want to be having those kinds of thoughts.
- **Recurrent/persistent** – they keep coming back even when the person doesn’t want them
- **Distressing** – obsessions are NOT pleasant and the person is distressed by them

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Obsessions can take the form of:

1. **Thoughts/Ideas** – e.g., “I think I might have committed the unpardonable sin.”
 2. **Images** – e.g., intrusive pictures of violent, sexual or blasphemous things.
 3. **Impulses** – e.g., the feeling that one might say a cuss word out loud in church.
- It is important to note that everyone has occasional obsessions. Yes, everyone. Research studies have repeatedly shown that occasional obsessions are part of the human experience and are “normal.”
 - Research has shown that “normal” obsessions and “clinical” obsessions are the same in terms of content (e.g., fearing that a loved one will be in an accident, harming someone, etc.). However, when people without OCD experience an obsession, they are able to dismiss it and go on. Conversely, individuals with OCD find obsessions difficult to dismiss, have significantly more obsessions, experience high levels of distress over the obsessions, spend much more time trying to sort out the significance of the obsessions, and engage in compulsive behaviors or mental acts to neutralize the feared outcome associated with the obsessions.
 - The thoughts, impulses, or images are not simply excessive worries about real life problems. For example, a person in a difficult financial situation who is worrying about how she/he will pay for car repairs is an example of a real life problem and is not an obsession.
 - The person attempts to ignore or suppress the thoughts, impulses, or images or to neutralize them with some other thought or action.
 - The person recognizes that the obsessional thoughts, impulses, or images are a product of his or her own mind (not imposed from without like when a schizophrenic hears voices).

Definition of Compulsions¹:

1. “Repetitive behaviors (e.g. hand washing, ordering, checking) or mental acts (e.g. praying, counting, repeating words silently) that the person feels driven to perform in response to an obsession, or according to rules that must be applied rigidly.”
2. “The behaviors/mental acts are aimed at preventing or reducing distress, or preventing some dreaded event or situation. However, these behaviors/mental acts are either not connected in a realistic way with what they are designed to neutralize/prevent or are clearly excessive.”

Summary Point: Simply put, *obsessions* are thoughts, images, or impulses that create anxiety/distress and compulsions are behaviors or mental acts that are done to prevent or reduce anxiety/distress.

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SO WHAT IS SCRUPULOSITY?

Scrupulosity is one subtype of OCD. Other subtypes of OCD include checking, need for symmetry, repeating, contamination/cleaning/washing, and saving/hoarding. Obsessions and compulsions containing religious themes, hypermorality, pathological doubt/worry about sin, and excessive religious behavior are referred to as scrupulosity. The name “scrupulosity” was derived in the following way:

The word ‘scruple’ is derived from the Latin “*scrupulus*’, a rough or hard pebble that causes discomfort if trodden on; a later meaning was a minute apothecaries’ weight, one twenty-fourth of an ounce, so small as to affect only the most sensitive scales. The term in English acquired a moral interpretation of a thought or circumstance so insignificant as to affect only a very delicate conscience. In religious terminology a scruple is an “unhealthy and morbid kind of meticulousness, which hampers a person’s religious adjustment” (Weisner & Riffel, 1960)² (p. 29).³

Some ways to distinguish between normal religious practice and scrupulosity^{4,5,6}

1. A healthy faith is not associated with debilitating worry and fear.
2. The more you focus on scrupulosity, the more entangling it is, and the worse it gets. It creates stress.
3. Scrupulosity is not responsive to spiritual interventions. For example, for the scrupulous person spiritual interventions (e.g., confession) may produce momentary relief, but the symptoms will return.
4. People enjoy and want to engage in normal religious practices, whereas people with scrupulosity perform the rituals to reduce anxiety/distress due to some feared consequence.
5. People with scrupulosity often have other symptoms and/or subtypes of OCD.
6. The individual’s practices far exceed what is required by the particular religious group (e.g., a scrupulous person who is fasting may believe that it is sinful to swallow their own saliva).
7. Scrupulosity interferes with normal religious practice (e.g., the person does not attend and/or does not partake of communion because of obsessional worries)
8. The individual’s beliefs and practices become very narrowly focused on “getting it right” and he or she loses sight of deepening their relationship with God (e.g. an individual becomes so consumed with whether or not he could have committed blasphemy without knowing it that he compulsively studies all of the passages on blasphemy and feels that he cannot afford to spend time reading or learning about anything else until his dilemma is solved).
9. The individual may focus so much time and energy on perfectly performing rituals that he or she overlooks more important aspects of faith (e.g. doing good toward others).
10. Scrupulosity closely resembles other subtypes of OCD in that there is an overt focus on compulsions (repeating prayers, checking, multiple confessions, reassurance seeking) in response to distressing, intrusive, unwanted and repetitive thoughts, images or impulses.

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HOW HELPERS ACCIDENTALLY BECOME PART OF THE PROBLEM

- Because of the distress that people with scrupulosity feel, they often turn to others for reassurance and help. While seeking out support and talking to others about our problems is quite healthy in most cases, for a person with OCD/scrupulosity, reassurance seeking is a compulsion and makes the obsessions worse.
- Remember how the obsessive-compulsive cycle works: obsessions make anxiety go up (e.g., worrying that one has blasphemed the Holy Spirit) and compulsions (e.g., confessing and seeking reassurance from others) bring anxiety down. Unfortunately, many of the people trying to help scrupulous individuals become part of the problem instead of being part of the cure.
- Because, on the surface, scrupulosity looks like a spiritual problem, it is all too easy for Elders/ministers, friends, and family to give advice and recommend Bible verses, prayers, etc. in a way that actually accelerates the OCD/scrupulosity and causes more distress to the person.
- While the scrupulous person may get momentary relief from getting reassurance, in the long run, reassurance makes the obsessions stronger and more distressing.
- It is very important that people trying to help a scrupulous person be educated about OCD/scrupulosity in order to learn how to best provide support and help to the person.

CONCLUSION

Scrupulosity is a subtype of a mental disorder called Obsessive-Compulsive Disorder. Because the symptoms of scrupulosity involve spiritual concerns, it is often mistaken for a spiritual problem. If you, or someone you know, have symptoms that sound somewhat similar to scrupulosity, it is highly recommended that you seek an evaluation by a mental health professional who understands OCD. Please feel free to call ACCFS for more information on scrupulosity/OCD, a telephone consultation, or counseling.

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RECOMMENDED RESOURCES

OCD-Scrupulosity information from ACCFS

- Coping Statements for Christians with OCD-Scrupulosity
- Go to www.scrupulosity.org for more information and free downloads.

Adults with OCD:

- Hyman, B., & Pedrick, C. (2010). The OCD Workbook (Third Ed.). New Harbinger Publications.
- Purdon, C., & Clark, D. (2005). Overcoming Obsessive Thoughts. New Harbinger Publications.
- Schwartz, J. (1996). Brain Lock. Regan Books.

Children/Adolescents with OCD:

- Chansky, T. (2000). Freeing Your Child from OCD. Time Books.

For Family Members:

- Landsman, K, Parrish, K., & Pedrick, C. (2005). Loving Someone With OCD. New Harbinger Publications.
- Van Noppen, B., Pato, M., & Rasmussen, S. (2001). Learning to Live with OCD. OCFoundation.

Support Organizations:

- International OCD Foundation: www.ocfoundation.org

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