

Principles Of Effective And Religiously-Sensitive Exposures In OCD Treatment

This document is for individuals with OCD who are in (or are considering) treatment for OCD, especially the subtype of OCD called scrupulosity where obsessions and compulsions become intertwined in religious and moral matters. Exposure and Response Prevention (ERP) is often referred to as the “gold standard” in OCD treatment. Those with scrupulosity sometimes fear that treatment for OCD will somehow violate their faith. This sometimes leads to people to avoid aspects of treatment or drop out of therapy prematurely. Hopefully this document can guide you and your treatment providers in developing effective exposures that are also sensitive to your Christian beliefs and values.

Get Perspective on your Goals for Exposures

- You need to be able to do whatever other people from your church/denomination can do as part of normal practice of faith.
- Identify someone (elder, minister, etc.) who can help you and your therapist determine what things are part of the true practice of your faith and church community (i.e., what is normative) versus what is OCD. This person should understand OCD (or be willing to learn about it).
- The 85% rule can also be used to help you identify what is normative (i.e., typical behavior or practice). If out of 100 people from your church, 85% or more do something, then it is normative.

Take the Risk to End Compulsions, Neutralizing, and Avoidance

- You must stop avoiding people, places, things, images, etc. that trigger your religious obsessions.
- You must stop reassurance seeking and repetitive confessions (whether that is to others or to God).
- You must give up trying to have absolute certainty about matters of faith. Instead, live out your faith by trusting God through the uncertainty.

Use your CBT, ERP, and ACT Tools

- Anytime you can do a direct (in-vivo) exposure to something, do it!
- Anytime you can do an imaginal exposure to something, do it! Exposures by doing loop recordings can be very helpful.
- When you can't do an in-vivo or imaginal exposure, use ACT and mindfulness-based cognitive therapy.

Coping with the Uncertainty about Sin or Offending God

- If you wonder if you have sinned (e.g., “What if I...?”) or aren't sure if you have, then you need to move on and go forward as if you didn't. Do the next right thing.

Using ACT and Mindfulness-Based Cognitive Therapy

- Your goal is to allow obsessional thoughts to float through your mind without fighting them.
- When thoughts of a religious, sexual, or immoral nature come into your mind, you must reject the notion that you must fight, analyze, or control the obsessions in order to show God (or yourself) that you don't want them.
- You need to do exposures to the uncertainty, doubt, and guilt you feel.

Don't Delay; Push Forward

- To whatever degree you can tolerate the anxiety, distress, and uncertainty of the obsessions today, you must keep pushing yourself to go longer and further without neutralizing.

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What You Do (and Do Not) Have to Do:

- You do not have to do exposures that involve doing things your faith specifically forbids or says is sinful or immoral.
- You do not have to destroy, tear, or burn your Bible.
- You do not need to do exposures to pornography.
- You do not have to sit in church shouting things in your head you consider blasphemous at the preacher. But, you do need to be able to sit in church and allow the thoughts you fear are blasphemous to pass through without neutralizing.
- You do not have to give up the core beliefs of your faith. But, you do need to learn how to follow the tenants of your faith and not OCD's skewed version of faith.
- You do not have to leave or stop going to your church. But, you do need to learn to live in a way that is functional.
- You do not have to completely stop praying. But, you do need to learn to pray in a way that doesn't feed into OCD. (e.g., "God, give me grace to push through my feelings of uncertainty and to not do my rituals").
- You do not have to share or agree to the same religious beliefs as your therapist. But, you do need to follow through on your agreed-upon exposure exercises.