

Obsessive compulsive disorder (OCD) self-help guide



1. Introduction

This self-help guide is intended for people with mild-to-moderate symptoms of OCD. If you're feeling distressed, in a state of despair, suicidal or in need of emotional support you can phone NHS 24 on 111. For an emergency ambulance phone 999.

This guide aims to help you:

- find out if you could have symptoms of obsessive compulsive disorder (OCD)
- understand more about OCD
- find ways to manage or overcome OCD symptoms

This guide is based on Cognitive Behavioural Therapy (CBT). CBT helps you to examine how you think about your life, and find positive ways of exposing yourself to and managing challenges caused by OCD.

How to use the OCD self-help guide

Working through this guide can take around 30 to 40 minutes, but you should feel free to work at your own pace.

To type in a graphic or diary, click or tap the part you'd like to fill in and use your keyboard as usual.

You can save and print this PDF guide on your device at any time.

2. Symptoms of OCD

Do you often do the same thing over and over again, even when you don't want to?

Do you feel like you have to get things "right", even if you know there's no real need to worry about getting them right?

Do you spend a lot of time worrying that you said or did something you shouldn't have?

Do you worry about throwing things away?

Do you frequently worry about dirtiness or contamination and have to clean? Do you have to clean things in a certain way to make sure it's "right"? For example, you have to wash your hands a certain way every time you feel they might be dirty.

Do you frequently have to check things or perform rituals, or you worry that you, or someone you care about, will be harmed? For example, you have to check the front door is locked a certain number of times or you worry your home will be burgled.

Do you have to do things in your mind in order to feel safe, or avoid worrying someone you care about will be harmed? For example, you have to count steps in your mind when you walk or something bad will happen to a member of your family.

Do you focus on items being laid out a certain way, and try to organise things based on counting or symmetry? For example, when you set the table there have to be an even number of places, and the cutlery all has to line up in a certain way.

Do you feel like thinking or doing certain things will cause bad things to happen, and you have to "undo" thoughts or actions with rituals? For example, if you read

an upsetting news story while thinking about a loved one, you have to think about them while reading something positive to avoid your loved one being harmed.

If you answered "yes" to any of these questions, you might have symptoms of OCD. There are different types of OCD symptoms. It's possible to have a number of different symptom types, or for all of your symptoms to be the same type.

Types of OCD symptoms

Checking

Things you might think, do, or feel:

- repeatedly checking you've switched lights or other electrical devices off
- repeatedly checking you've locked doors, set the burglar alarm, or taken other security measures
- repeatedly checking things in your car, like making sure the handbrake is on, going back to the car multiple times to ensure you've closed the door, or switching your key fob off and on again
- have unpleasant and upsetting thoughts about what could happen if you haven't checked everything

Doubting

Things you might think, do, or feel:

- worry that you said or did something offensive to another person, even if nothing like that happened while you were with them
- worry that you posted something offensive on social media, even if you haven't used social media recently

- experience unpleasant thoughts about causing harm to another person and worry that you have caused harm without meaning to
- feel like you can't trust your memory of your own behaviour – thinking you could have done something terrible without remembering it

Slowness

Things you might think, do, or feel:

- take a long time to complete a task that shouldn't take much time because you're concentrating on small details
- have trouble finishing a task because you worry it isn't "right" or done properly
- feel like you can't trust your own abilities – you aren't confident enough in your ability to do something right, even if it's a very simple task

Washing

Things you might think, do, or feel:

- wash your hands over and over again, even if you don't want to and would like to stop
- develop special, excessive ways of cleaning that feel frustrating and like a waste of time
- feel that you'd rather be doing something else, but you feel you have to finish your routine of washing or cleaning
- ask the people you live with to do certain things that you feel keeps the home clean, but which are actually excessive – for example you might ask your family to wear different clothes outside and inside the house

- feel very worried about dirt and germs, and have unpleasant thoughts about becoming unwell or other people becoming unwell because you didn't clean something properly

3. What is OCD?

You might have heard about OCD on TV or in movies, or heard people say things like "I'm so OCD" when talking about being tidy or liking to be clean. It can be hard to tell the difference between OCD symptoms, normal behaviour that's perhaps a little anxious, or conditions like [anxiety](#).

For example, if you're worried about your partner walking home alone at night, that's normal. If you feel you have to do a certain thing to keep them safe every time they walk home, like singing a certain song or thinking a certain thought, you may have symptoms of OCD.

What are obsessions and compulsions?

The main symptom of OCD is repeated, persistent thoughts or images appearing in your mind that are unwanted, distressing, and time-consuming (for example, taking up 1 hour or more a day). These thoughts and images are difficult to control, and are often called 'intrusive thoughts'.

Common obsessions are about:

- forgetting to do something important, or doing an important task badly
- being contaminated by germs
- harming others
- doing socially unacceptable or upsetting things (e.g. swearing at someone passing you on the street)

- a need for everything to be in a particular place or order

There's more information about common obsessions and symptoms in the next section.

Rituals

'Ritual' means something you do over and over again. You usually have to do this the same way every time. People with OCD frequently have rituals that make them feel better about their obsessions, and temporarily relieve their symptoms. These rituals often include a lot of repetition, so you can end up doing the same thing over and over within one occasion of performing the ritual.

A ritual can be something that other people can see, like repeatedly washing your hands. Other rituals are hidden from other people, like counting to certain numbers in your head over and over. These hidden rituals are just as distressing as the more obvious ones, and take up just as much time and energy.

Some rituals follow a pattern, and some don't. Sometimes there aren't a set number of repetitions or steps in a ritual – many people with OCD will do the same thing over and over until it 'feels right', which can take a very long time and a lot of repetitions. How much time you spend doing or repeating a ritual can depend on other things, like whether you're having a difficult day otherwise, so some days the rituals can take longer than others.

It's also common for people with OCD to feel they have made a mistake during a ritual, so they need to start over again from the beginning.

Rituals, especially when they go on for a long time, can make you feel trapped, and very frustrated and upset. It can begin to feel like rituals are involved in everything you do, and that they're taking over your life.

Examples of rituals include:

- washing your hands in a certain way
- counting to certain numbers, or repeating songs or phrases in your head
- going back to your house to check you locked the front door
- doing sums, looking for words that rhyme, or seeking out particular numbers and letters, and feeling like these things are connected with people you care about
- asking a partner or other person close to you if you have done something wrong, or asking your family to confirm you've done something correctly – this will be discussed more further along in the guide
- going back over what you think you did or said in a recent situation, or even in the last few minutes, looking for evidence you've done something incorrectly
- turning a switch off and on again to make sure it's definitely switched off

During a ritual it's normal to feel and be aware that there's no logical reason for the ritual. You could even know that the ritual is doing harm – for example, you might be aware that washing your hands repeatedly is hurting your skin – but feel unable to stop yourself doing it.

4. What causes OCD?

There are lots of things that can lead to someone developing OCD. Often it's a combination of two or more of these things.

Psychological causes

People who worry a lot are prone to developing OCD – it's how their minds try to deal with the worry and give them a sense of control. For example, a chef who has OCD about making customers sick, might wash their hands more than necessary in an attempt to feel in control of that worry.

People with OCD feel responsible for the things that worry them – they feel that by carrying out rituals, or thinking in certain ways, they can affect events and situations that aren't actually directly related to them. For example, you might worry that thinking about something bad happening will cause it to happen.

People with OCD often have difficulty telling thoughts and actions apart – if you have an anxious thought, you might feel the same as if the thing you worried about had actually happened. For example, you might worry that you shoved someone in the street and didn't notice, and then spend hours thinking that you knocked them over.

OCD can make it hard to deal with 'taboo' thoughts – violent or sexual thoughts that everyone has, but which feel particularly distressing to people with OCD. For example, a new parent might have thoughts about harming their child, and feel that those thoughts make them a violent person. There is more detail about these later on in the guide.

People with OCD can have an unhelpful way of thinking about the thoughts they have. This often means feeling as if thoughts have the power to affect the world around you. You might feel some thoughts have to be 'undone' or avoided so they do not cause harm. For example, you might think "I hope I don't cause an accident driving home". After having that thought, you might feel you can't drive home as you'll cause an accident as a result of the thought. Or you might think you have to picture driving home safely a number of times in order to 'undo' the previous thought.

Experiences

OCD often develops after a stressful time in someone's life, particularly a time when there's a lot of change or an increase in responsibility. Events like exams, going to university, getting a new job, moving house, or becoming a parent are all examples

of the kind of situation that can trigger more anxiety, and lead to OCD symptoms. For most people, OCD develops between the ages of 10 and 21 - this is a time that often has a lot of changes and increases in responsibility. It's rare for people over 30 to develop OCD for the first time.

New responsibilities are particularly likely to cause OCD symptoms to start – becoming responsible for something or someone for the first time can be very stressful. A new responsibility can create a lot of anxiety about doing things 'wrong' and causing harm. It's fairly common for OCD to start during pregnancy, and to affect new parents. Many people looking after their first child will do things like sterilise bottles over and over again, or repeatedly check parts of the cot or high chair are secure.

Some experiences in a person's development can increase the risk of developing OCD, although OCD can also develop without these experiences. They include:

- emotional, physical, and sexual abuse
- neglect
- social isolation
- bullying

Biological

There's some evidence that genetics can make you more likely to develop OCD, or have OCD symptoms - meaning you can develop it if you have a parent with OCD. There's also some evidence these symptoms can be caused by the way your brain and body work together.

However, there are a range of things that can cause OCD, and a person can still develop it even if no one else in their family has the condition or displays any OCD-like symptoms.

5. What are intrusive thoughts?

Intrusive thoughts are a big part of OCD, and understanding what they are and what they mean can be very helpful in managing OCD.

Intrusive thoughts are unwanted and unwelcome thoughts and images that pop into your mind without you doing anything to make them appear. These thoughts don't need to have any link to reality or to you as a person. Intrusive thoughts are often about things that you think are very wrong – they can be violent, sexual, or involve loved ones or vulnerable people being harmed.

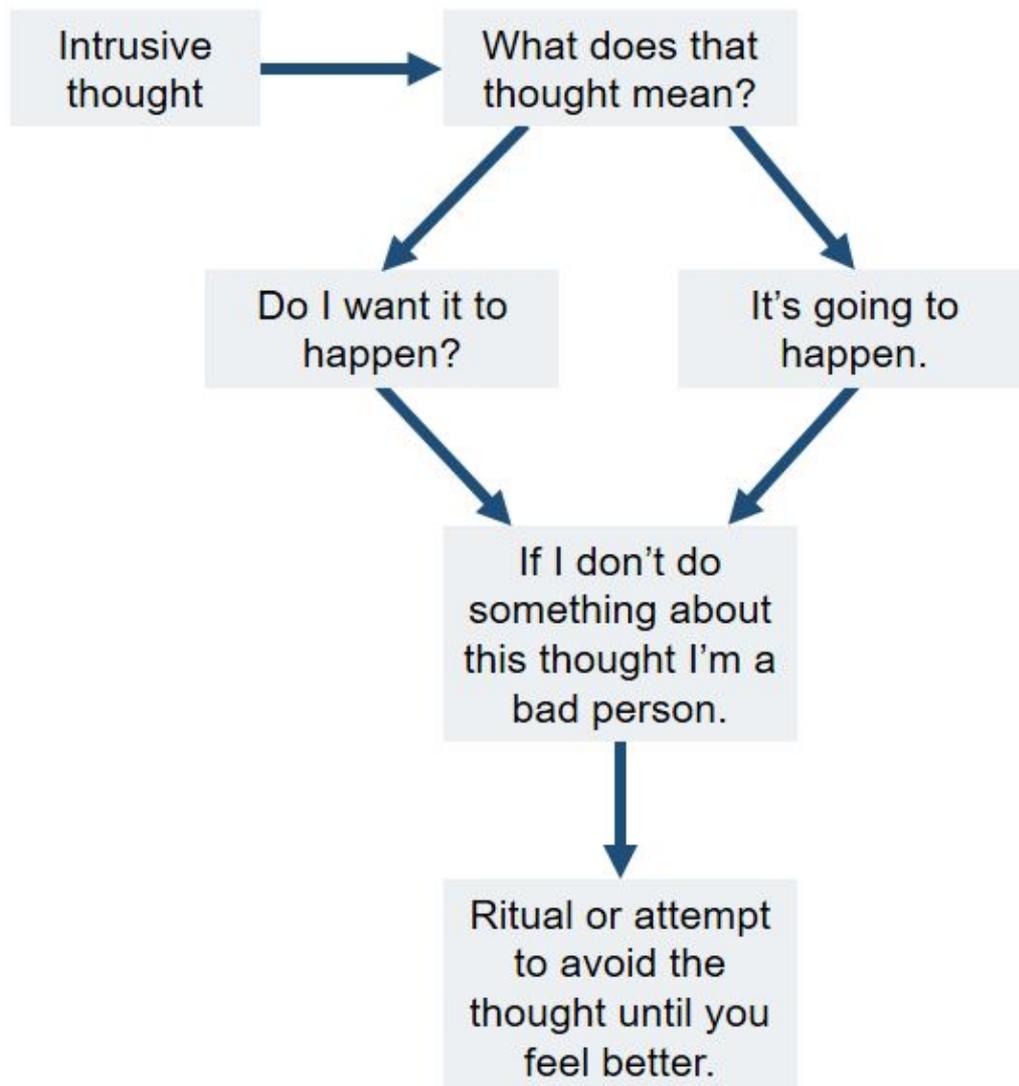
Intrusive thoughts are called intrusive thoughts because they are highly distressing and often cause a physical reaction – making you feel very shocked or anxious. These thoughts can be upsetting, frightening, or repulsive.

Sometimes you might have an unpleasant feeling and think it's due to an intrusive thought, when it's actually related to something else. Having intrusive thoughts regularly affects how you see the link between your thoughts and reality, and makes it hard to manage your emotions without performing rituals.

It's normal for people who have intrusive thoughts to worry that these thoughts say something about who they are – that violent thoughts mean you're a violent person, for example. This isn't true – in fact, intrusive thoughts are likely to be about the things that upset you the most. OCD rituals are often performed by people who are trying to avoid making these thoughts come true, or ensure that the thoughts don't represent who they really are.

Some people with OCD are distressed by the feeling that having a bad thought, even when they're sure it hasn't happened or isn't something they'd ever want, is more or less the same as wanting to do it - for example that thinking about a loved one being hurt is the same as wanting it to happen. Thoughts become equivalent to, or the same as, actions in their minds. This is called

'thought-action fusion', and it causes them to want to undo the thought or make it harmless by doing a ritual.



Thought-action fusion is a type of magical thinking that everyone has when they're children - it causes you to believe that your thoughts can affect the world around you. Thought-action fusion is very common, and it's part of the reason people with OCD connect thoughts or mental images to reality - for example, believing that if you think about harming someone, you'll act on the thought, or might have acted on it already without knowing. It's similar to wishful thinking, which everyone experiences as an adult.

6. Intrusive thoughts and rituals

Intrusive thoughts often involve something bad happening to someone else, especially someone you care about, or even a pet. They can be about a specific fear, or you might just have a general feeling of worry or distress.

Sometimes they're about something bad happening to you. Many people have a fear of illness, for example, that leads to compulsive behaviour where they check for signs and symptoms of a condition they're worried about.

OCD affects the relationship you have with your thoughts – it makes it feel as if every intrusive thought is important and has meaning that you have to deal with. You may feel like every intrusive thought says something about who you are as a person. You might also feel or believe that your intrusive thoughts affect reality – bad things will happen because you thought about them happening.

OCD makes you feel as if you have control over intrusive thoughts. Because it feels like you can do something about them, you begin performing rituals. In addition to the types of rituals discussed earlier in the guide, which involve doing things, you might end up performing rituals inside your head when intrusive thoughts happen.

These can include:

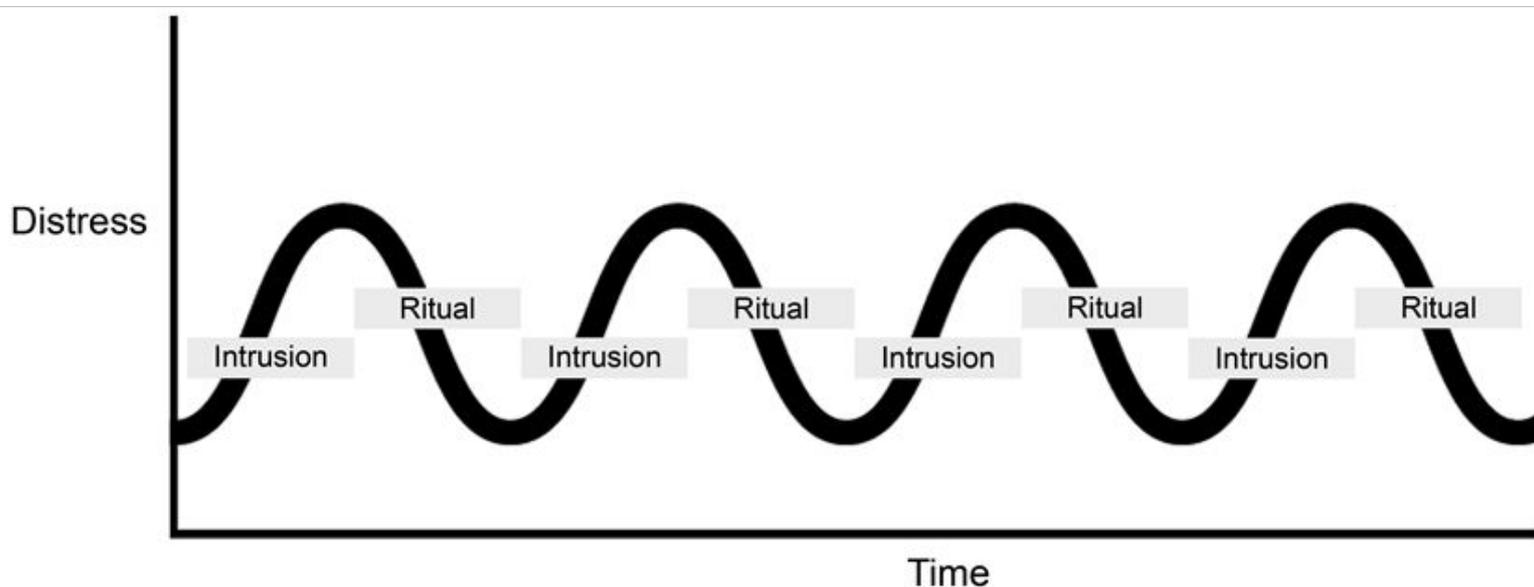
- deliberately thinking about something else
- thinking about something positive to 'undo' the intrusive thought
- trying very hard to avoid having the intrusive thought

Rituals in your mind can involve things that are hard to explain to other people – for example thinking of links between words and letters or performing mathematical calculations.

Both intrusive thoughts and rituals can evolve and change over time. You might

start worrying about different things, which means you have different intrusive thoughts. The rituals you use can become more complex, or change, or start taking longer, if you feel they aren't working any more.

Unfortunately, rituals don't work at all in the long term, as they only provide temporary relief. It's important to change how your mind responds to these thoughts, so you don't have to perform rituals any more. We'll explore how you can do this further along in the guide.



Rituals provide what's called 'negative reinforcement' - this means taking away something unpleasant. For OCD, rituals take away the feeling of anxiety. So even though you don't get any benefit from performing rituals, it still feels as if you have to do them, and the pattern continues, as shown in the graphic above.

7. What keeps OCD going?

There are a few behaviours and types of thought that make it harder to manage OCD. Being aware of what these are and how they affect your day-to-day life can be very helpful in managing and overcoming symptoms.

Rituals

You can find information about rituals in section 3 of this guide. It's also discussed in section 6, with information on how they affect intrusive thoughts.

It might feel like rituals are helping you, but it's important to try and reduce how often you use them. Rituals actually make it harder for you to manage OCD, because you never get the opportunity to prove to yourself that the intrusive thoughts aren't real. You also never get the chance to learn that you can cope with experiencing anxiety, or that the anxiety might not be as bad as you're imagining.

It can also feel as if the rituals are the only thing that makes you feel better, because they provide temporary relief. That can make your anxious beliefs feel more realistic, even though they aren't. For example, the relief provided by checking you locked the front door can make you feel more sure that if you hadn't done it, something bad would have happened to someone you care about.

Reassurance

As mentioned in section 3, rituals can take the form of asking someone else to reassure you about an intrusive thought. For example:

- if you have intrusive thoughts about forgetting things, you might ask someone close to you to check if you left your wallet or phone behind

- if your intrusive thoughts are about harming others, you might ask people if you've "behaved yourself" that day and avoided hurting anyone
- if you worry about saying or doing offensive things without meaning to, you might ask others if you've offended or upset them
- you might check other people's facial expressions and behaviour to try to see if you've offended or upset them

In general, reassurance behaviours are indirect rituals - other people are performing rituals for you, whether they intend to or not. This has a negative effect on you, as it means you still aren't overcoming the desire to perform rituals, but it can also make life more challenging for the people close to you.

Avoidance

Another thing that can keep OCD going is avoiding doing things that could trigger intrusive thoughts. For example, you might cross the road when you see someone who looks vulnerable if you're scared of accidentally hurting people. This doesn't give you the chance to see that if you hadn't avoided the situation, it would have turned out fine and no one would have gotten hurt.

Similarly, you might avoid doing things in the house. For example, you might never cook in case you leave the hob on and start a fire. This highlights an important problem with avoidance – it means the people close to you become involved in the OCD too. For example, there might be a room in the house that your family never uses because you worry about it becoming contaminated. Alternatively, your family might do things for you for reassurance, as discussed above, or help you to avoid things you don't want to do.

While this happens because the people close to you care about you, and are trying to protect you from feeling anxious, it actually has the opposite effect in the long

run. If everyone's playing a role in using rituals to deal with intrusive thoughts, there's no opportunity for you to overcome those thoughts on your own. It can also be very stressful for your loved ones. There is more information on this in Section 12.

8. Activity 1 – blocking out thoughts

Just as people avoid situations and tasks that trigger unwanted thoughts (e.g. cooking or being the last person to leave the house), they also try to avoid unwanted thoughts by pushing them to the back of their minds.

For example, someone who has a thought that they might harm their loved one will try to block this from their mind as best as they can. Unfortunately we know the harder someone tries not to think about something, the more likely they are to do so. As a result, this coping strategy actually just ensures the problem continues.

Because intrusive thoughts are such a big part of OCD, you might spend a lot of time thinking about your thoughts. For example, you might:

- frequently try not to think about something distressing
- try not to think about loved ones when you're feeling distressed, in case it causes bad things to happen to them
- frequently find or imagine links between the things you're trying not to think about, other thoughts, and the world around you - this can continue until your thoughts become a series of connections that stop making sense, even to you, and make you feel even more distressed

Blocking out thoughts can also cause something called 'thought rebound' where the effort you use to block out unpleasant thoughts actually increases how much you're having them. Because you're thinking about these thoughts all the time, they can't be successfully avoided.

Activity 1 – white bear

This activity will demonstrate how difficult it is to successfully block out thoughts.

1. For the next 30 seconds, try really hard not to think about a white bear.
2. Count the number of times you think about white bears.

How often did you think about the white bear?

This activity demonstrates it's not your fault these thoughts can't be blocked – it's just how people's brains work.

9. Activity 2 - exposure

A very important part of managing OCD is learning to live with the uncomfortable and distressing feelings that come when you do something you'd usually avoid, or when you don't perform a ritual that brings relief from intrusive thoughts.

This activity will help you expose yourself to situations and behaviours that you've been avoiding or using rituals to cope with. This helps reduce the belief that you need rituals, and will make it easier to live your life without performing them.

1. Make a list of situations or activities that cause you distress and make you want to perform a ritual.
2. Give each situation a 'difficulty score' out of 10. If a situation causes you no distress, rate it 0. If it causes extreme distress, rate it 10.
3. Try to put the situations in order, from least distress to most distress.

Here's an example:

Situation	Difficulty score (0 = no distress, 10 = extreme distress)
Rinsing out a milk bottle to put in the recycling bin	4
Sorting out the household laundry (other people's clothes)	5
Changing the toilet paper roll	7
Taking out the bin	9

4. Start with the lowest-ranked item on your list, and try to do it without performing a ritual.
5. Keep repeating the lowest-ranked item on your list until you can do it without performing a ritual.
6. Move onto the next item.

Read the next section in this guide for tips on achieving these tasks, and information on completing more complex exposure tasks.

You'll find an exposure table to fill out on the next page.

Situation	Difficulty score (0 = no distress, 10 = extreme distress)

Breaking an exposure task down

Some tasks are so difficult that people with OCD can't jump right into exposure. If this applies to one of your activities, the best thing to do is get creative and break it down into smaller, more manageable tasks.

If all the activities you've thought of are rated 7 or higher, this will help you to confront them in stages, and overcome the compulsions around them more gradually.

You can try a graded exposure task in the next section.

Here's an example:

Situation: taking out the bin

Task	Difficulty score (0 = no distress, 10 = extreme distress)
Sitting next to the bin for 40 minutes	2
Your partner touching the bin and then touching your hand, and you not washing your hands afterwards	4
Touching the lid of the bin without washing your hands afterwards	5
Putting your hands inside the bin and not washing them afterwards	7

Taking out the bin	9
Taking out the bin without washing your hands afterwards	10

Working your way through steps like this takes longer, but it will help you overcome some of the biggest challenges that are currently being caused by your OCD.

10. Getting the most out of exposure

To get the best out of your exposure exercise, it has to meet these 5 conditions:

1. Graded

Graded means that you don't jump into the scariest situation right away. Start with the activity that causes you the least anxiety and work your way up to the most distressing.

2. Prolonged

Prolonged means that the activity has to go on long enough for you to start feeling less distress. You need to stay in the situation until your anxiety has dropped 50% from its level at the start of the exercise. If you start doing something and quickly stop because the distress is too much, you won't benefit from the activity.

3. Repeated

It's important to face the situation that causes you anxiety over and over, until it stops making you feel distress or compelled to perform rituals. Ideally, performing the task should start to become boring. It's best to do the activity that causes you the least anxiety repeatedly, every day if possible, until this has happened. Then you can move onto the next activity on your list.

4. Without distractions

When you're performing the activities that make you anxious, it's important to make sure you're paying attention to the distress you're feeling. This is an important part of overcoming compulsions. In order to do this, avoid doing anything during the exposure activities that could distract you from how you're feeling – for example, listening to music, talking to someone, or thinking about something else. Focus on the activity and try to 'push through' the discomfort.

5. Without compulsion

While you're performing the activities that make you uncomfortable, it's important you don't perform the rituals that would normally relieve your distress. Exposing yourself to activities and situations you'd normally avoid is helpful, but using rituals or other coping methods prevents you from learning how to cope with the discomfort. You should also avoid reassurance, as mentioned earlier in the guide – for example, if you're trying to avoid checking you've locked your front door, you shouldn't ask your partner to check for you.

It's important that you don't perform rituals or ask for reassurance at any point – even after you've completed the task. For example, let's say you were trying to leave the house without checking the bathroom window was closed. You'd still be performing the ritual if you waited until you'd reached your destination and then asked your partner for reassurance. Don't 'save up' the ritual until later – try to perform the task completely without it.

You can fill out a graded exposure checklist and table below.

Task	
How is it graded?	
How long can you stay in the situation?	
How often can you repeat the situation?	
How will you avoid distractions while performing the task?	
How will you avoid rituals and reassurance while performing the task?	

Use the table below to record the steps that make up your task, and how much distress you experienced at each step.

Task:	
Step	Difficulty score (0 = no distress, 10 = extreme distress)

Step	Difficulty score (0 = no distress, 10 = extreme distress)

11. Tips for exposure exercises

Here are some tips that will help with exposure.

If you have a number of different fears that cause you to perform rituals – for example, you’re afraid of your home being burgled, and you’re also worried about germs – you can create two separate lists of exposure exercises. You might find this less challenging than combining both sets of rituals in one list. You can save multiple copies of the exposure table you choose to make this easier.

If you perform a ritual while you’re doing a task, re-expose yourself and begin the task again. For example, if you’re trying to avoid checking you locked your front door before going out and you end up going back to check, unlock the door, go back inside, and wait for a few minutes. Then leave again, lock the door, and try to avoid going back to check the lock.

Try saying what you’re doing as you’re doing it, either out loud or in your head. For example, “I’m leaving the house; I’m locking the door; I’m walking away without checking the lock; I’m going down the street and I’m not checking the lock.” This helps you to fully connect with the exposure exercise.

Be creative about how you can work toward doing something that causes you a lot of distress, without jumping straight in if it’s too much. So for example, as discussed in Section 9, if you’re afraid to take out the bin and feel you need to frequently wash your hands, you can approach the task in stages. You could start with being in the same room as the bin for a period of time without washing your

hands, then move on to sitting near the bin for the same length of time without washing your hands. You could then move on to touching the bin, having your hands inside the bin, and finally to emptying the bin, all without washing your hands afterwards.

Focus on one task at a time and think of different ways you can use to approach it and break it down into different steps. Once you know you can complete one task without performing a ritual, you can move on to the next one.

Don't worry if you struggle to stop performing rituals - remember that exposure is difficult, and it's normal to have trouble with it at first. Setbacks will happen - try to think of them as learning opportunities.

12. Family and loved ones

As mentioned earlier in the guide, many people with OCD symptoms find their family and loved ones become involved in their compulsions and rituals. This often happens very gradually, until rituals and avoiding anxiety triggers become part of daily life for the whole household.

In the short term, reassurance from loved ones feels helpful, because it makes you feel less anxious and distressed at the time. In the long term, this reassurance makes it harder for you to overcome compulsive behaviours.

When you're trying to expose yourself to situations and tasks that cause you distress, it'll be helpful to let your loved ones know what you're doing and how exposure works. When you're working through exposure tasks, remember not to involve them in reassurance or rituals – for example, don't ask them to check that the front door is locked, or complete a task for you if you're struggling. All this does is

replace your ritual with a different behaviour, and prevent you overcoming the anxiety on your own.

If you think that the people close to you are helping to keep your symptoms going by trying to avoid upsetting you, or make you feel better, it might help to show them this guide. You can work together to make a plan for gradually cutting down on rituals, reassurance, and avoidance at home.

13. Managing OCD

After working on exposure, you can work on changing the patterns of unhelpful thinking that have formed in your mind. Once you're able to recognise and challenge these unhelpful thoughts, you'll also be able to work on reducing the behaviours that keep OCD going.

Patterns of unhelpful thinking

Here are some common patterns of unhelpful thinking:

Increased feelings of responsibility

People with OCD symptoms often feel extremely anxious about being blamed or held responsible if something bad happens. For example:

- you worry that people would be angry if they left a plug in and there was a fire in the house
- you're afraid of being blamed if someone gets ill after eating food you prepared

Overestimating the possibility of danger

It's common for people with OCD to think situations are more dangerous than they actually are. For example:

- you believe if you forget to lock your front door, you'll definitely be burgled
- you believe that if you don't wash your hands after touching a bin, you'll definitely get ill

Underestimating their ability to cope with anxiety

Anxiety can feel awful, but it won't actually harm you. People who believe that anxiety is dangerous and harmful usually find it harder to stop performing rituals that temporarily relieve the anxiety. For example:

- you believe that a lot of anxiety will damage your mind or body
- you're afraid that if you don't perform rituals, the anxiety you feel will get "out of control" and you won't be able to calm down

Difficulty coping with uncertainty

People with OCD can struggle to cope when they are not completely certain about something, or believe that they don't have all the information they need to feel calm. For example:

- you insist on checking to make sure a task has been done correctly
- you need to ask your partner if they've done a task a certain way in order to feel satisfied that it's been done properly

Because you need to be certain about everything, you might find yourself repeatedly checking or asking for information when it comes to tasks. For example:

- "I need to check the taps are turned off."
- "I have to be sure that he unplugged the plugs from the sockets before we left the house – I need to ask him again."

Attaching high significance to thoughts

When you think your thoughts have high significance, it means you believe they are more important than they actually are. It can also mean you believe your thoughts alone can affect the world around you. People who attach high significance to thoughts are more likely to perform rituals, because the idea of thoughts being important causes a lot of anxiety.

For example:

- you might have an intrusive thought about swearing at a stranger in the street, and think it's just as bad as actually doing it
- you might have an intrusive thought about harming someone you love, and think that because you had that thought, you're a bad person

Some people believe thinking about something bad makes it more likely to happen – for example if they think about a loved one being in a car accident, they worry that they will cause a car accident to happen. This means you might feel you need to perform rituals to 'undo' the thoughts.

You might also find yourself focusing on the thoughts themselves, and spending a lot of time monitoring yourself to watch out for unpleasant thoughts and images popping into your mind. This can increase anxiety, as you're thinking a lot about negative thoughts and paying less attention to positive thoughts and the world around you.

Do any of your unhelpful thoughts follow these patterns? Make a list of the ones you have most often, and try to put them in one of the categories above.

People often assume the thoughts that come into their minds are 100% true.

However, thoughts are not facts - we often make mistakes with what we think. This is especially true if our thoughts follow some of the patterns of unhelpful thinking

described above.

This isn't something to feel bad about, it's just the way our minds work. Learning to question and manage these thoughts, rather than accept them as facts, can help control and reduce OCD symptoms.

14. How to challenge unhelpful thoughts

In order to challenge unhelpful thoughts, the first thing to do is recognise negative thoughts, and the cycle that negative thoughts create with our minds and bodies.

This cycle keeps compulsions going.

Once you've learned how to recognise an unhelpful thought, you can move on the next stage - challenging the thought, so you can stop feeling the need to perform a ritual. The example below outlines the cycle of anxious thoughts and feelings. It shows how a situation can trigger intrusive thoughts that lead to unhelpful thoughts. These unhelpful thoughts then make you feel as if you have to perform a ritual. Because the ritual provides relief, it strengthens the idea that you need to perform rituals in order to prevent bad things from happening, or to avoid feeling like a bad person.

Below, you'll find an example of the cycle of unhelpful thoughts. In the next section, you can fill out an example of this cycle from your own life.

Example:

Situation

You're chopping vegetables with your child in the house.



Intrusive thought

"I could stab my child with this knife."



Unhelpful thought

"This thought means my child's going to get hurt. I have to check on them."

15. Activity 3

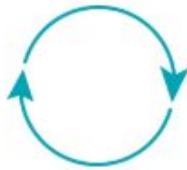
Use the boxes below to write about a time when you had an unhelpful thought. This will help you to understand and remember how the cycle of negative thoughts works.

The next time you have an unhelpful thought that makes you want to perform a ritual, it will be easier to remind yourself of what is happening and challenge the thought.

Situation



Intrusive thought



Unhelpful thought

16. When you start challenging thoughts and compulsions

At first, when you start challenging compulsions and unhelpful thoughts and reducing reassurance and rituals, you're likely to find the feelings of distress get worse.

You might find:

- physical symptoms can start or get worse - you might feel sick or shaky
- the consequences you imagine get worse - you might picture more frightening situations or types of harm
- you feel anxious and frightened in general

This happens because you're dealing with increased anxiety as you try to stop doing the things that provided temporary reassurance in the past.

It's important to remember this is temporary - during exposure, if you don't feel anxious, you aren't doing it properly. You're working hard to challenge these symptoms, and it will be difficult at times.

These feelings are caused by the work you're doing to move past OCD symptoms - if you keep going, they will reduce and eventually stop. Remember to be proud of yourself for doing this hard work.

17. Challenges to an unhelpful thought

Now you can challenge your unhelpful thoughts by asking these questions. Work through the questions below, using the examples to give you ideas.

Example:

“I wasn’t able to wash my hands after putting something in the bin in my kitchen. My hands are dirty and I’m going to get ill.”

1. Is there any evidence against this thought?

- “I don’t have anything on my hands that I can see.”
- “I’ve never gotten ill from putting something in the bin before, even when I haven’t washed my hands.”

2. Would you expect other people to perform a ritual in this situation?

- “I’ve never seen anyone else wash their hands after putting something in the bin.”
- “I wouldn’t expect anyone else to do it.”

3. Can you remember any times where you haven't performed a ritual in a situation like this? If so, what happened?

- "I put a wrapper in the kitchen bin, but I was on the phone and didn't have a chance to wash my hands. I was very anxious about it but I didn't get ill."

4. Can you identify any patterns of unhelpful thinking?

- "I'm overestimating the possibility of danger by thinking that putting something in my own kitchen bin and not washing my hands will make me ill."
- "I'm underestimating my ability to cope with anxiety – if I don't wash my hands, the anxiety isn't going to hurt me."

5. What information do you have now that could be helpful in this situation?

- "I know that sometimes situations seem a lot more dangerous than they are, and that's what makes me want to perform a ritual."
- "I know that I don't need to perform a ritual to feel better. I just need to cope with the anxiety until the urge to wash my hands goes away."

18. Activity 4

The aim of this activity is to use these challenging questions to create a helpful thought, and then use it to replace the unhelpful thought. By doing this you can reduce your anxiety and the need to perform rituals.

You'll also be able to record how much your anxiety reduces, so you can see the process working.

Now complete the table below to challenge your own unhelpful thoughts.

1. What's the situation? You could write who is there, what you're doing, and when and where it's taking place.

For example: "I'm chopping vegetables in the kitchen and my son is in the living room."

2. Intrusive thought

For example: "I could use this knife to stab my son."

3. What are you feeling? You could write how you feel and rate how strong your feelings are, from 0% to 100%.

For example: "Guilty - 90%"

4. Unhelpful thought

For example: "I'm a bad parent and a violent person."

5. Evidence against the unhelpful thought

For example: "My son loves me and I've never hurt him. I've never hurt anyone."

6. Can you identify any patterns of unhelpful thinking?

For example: "I'm attaching high significance to a thought."

7. Alternative/balanced thought - is there a different way of thinking about the situation?

For example: "That intrusive thought doesn't mean anything. I love my son and I'd never do anything to harm him."

8. After you've written the alternative thought, rate how much you believe in the thought from 0% to 100%.

For example: "I believe in this thought 70%."

9. Rate how strong your feelings are now, from 0% to 100%.

For example: "Guilty - 50%"

19. Next steps

Keep using the techniques you found helpful from this guide – they should continue to benefit you. If there are some things that you didn't find helpful to begin with, stick with them for a few weeks – CBT can take a little time to work.

Further help

If you're feeling distressed, in a state of despair, suicidal or in need of emotional support you can phone NHS 24 on 111. For an emergency ambulance phone 999.

If you feel you need more help with your mental health, try speaking to your GP, or [search for mental health and wellbeing services in your area](#).

For information and advice when you're feeling down, you can phone [Breathing Space](#) on 0800 83 85 87.

The Breathing Space phoneline is available:

- 24 hours at weekends (6pm Friday to 6am Monday)
- 6pm to 2am on weekdays (Monday to Thursday)

If you found this guide helpful and would like to do more work like this, [Living Life](#) offers a range of structured psychological interventions and therapies to improve mental health and wellbeing. This service is appointment-based and specifically for low mood, or mild/moderate depression or anxiety. Living Life are open Monday to Friday, from 1pm to 9pm, and you can phone them on 0800 328 9655 for an assessment appointment.

Learn more

To learn more about OCD, [read our article on the condition](#)

For more information about living with OCD, [visit the OCD Action website](#)

To learn more about managing OCD, and for information about local support, [visit the OCD UK website](#)

For information on anxious feelings, [read Why do I feel anxious and panicky?](#)

[Learn more about anxiety](#)

[Work through a mental health self-help guide for anxiety](#)

To learn more about managing anxiety, [visit Anxiety UK](#)