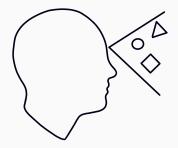
Module 5: OCD Is 100% Imaginary Amanda Petrik-Gardner, LCPC, LPC, LIMHP



Perception

What we perceive through our senses.

Source: O'Connor, K., & Aardema, F. (2012). Clinician's handbook for obsessive compulsive disorder: Inference-based therapy. Chichester: Wiley-Blackwell.



Imagination

What we generate (ideas, thoughts, images, etc), not present to the senses.

Not directly related to reality or the here and now.

Normal Doubt

vs Obsessional Doubt

Always direct evidence in the here and now.

They occur in the appropriate context.

Doubts tend to be quickly resolved.



Built in our imagination.

Comes from within you.

Occurs without direct evidence in the here and now. Not supported by reality.



Was there actually anything in the here and now that justified the doubt?

Anything you received from your senses?

But it is possible...

Many things are possible.

We are not trying to argue whether something is possible or not..

OCD attempts to use this "possibility" as justification, which there is still no evidence that it is happening in the here and now.

Example: But germs do exist. It's possible it is dirty.

*But is there any direct evidence? (for example, seeing dirt on you)

The obsession is not directly challenged. The client only needs to come to an understanding that there is no direct evidence for the obsession in the here and now.

Inferential Confusion

Inferential confusion occurs when a client mistakes an imagined possibility for a real possibility.

Future modules will assist the client with recognizing when they cross over from reality to non-reality.



Example

Story 1

A woman checks the front door five times when leaving to go to work and looks back several times to see if her cat has escaped. She also looks and fixates on the door when in her car for a few minutes. The cat has escaped once before in the summer when she was gardening and left the back door open. However, it has never escaped at the moment she leaves for work.

What is the doubt? Is this obsessional? If yes, what makes it obsessional (or if not, what makes it non-obsessional)?



Example

Story 2

A pharmacist recounts the number of pills when she gets distracted during her count. She believes the recounting is justified because it's important to be careful when it comes to people's health. Yet, she never has made any mistake with counting pills. However, she did once make a mistake in labeling the bottles.

What is the doubt? Is this obsessional? If yes, what makes it obsessional (or if not, what makes it non-obsessional)?



Questions Comments Examples

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