

INTRODUCTION

Inference Based Therapy – I-CBT

Difference Between ERP and I- CBT

Exposure and Response Prevention is a behavioral intervention.

It focuses on doing, to change what we know.

I-CBT is a cognitive therapy.

It focuses on knowing, in order to change what we do.

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

Adapted by Susan McKendry

I-CBT sees OCD as a “Doubting Disorder” Rooted in Reasoning

in treatment, our target is the reasoning process a person uses to come to a conclusion about something.

We use reasoning all the time in our lives to reach conclusions (i.e., when the sky looks dark, there is a good chance of rain).

Unlike these normal doubts that we all have, in OCD people struggle with obsessional doubts about a number of themes which are very difficult to resolve.

A doubt is a thought about what could be or might be or a what if (i.e., maybe I left the stove on, maybe I am contaminated, what if I am homosexual?).

In IBT, we will be targeting the “what if” doubt and where it is coming from.

The Role of Reasoning and Imagination

We know that the origin of obsessional doubt in OCD comes from a reasoning process as well as from the misuse of imagination which you will see, actually created the doubt in the first place.

Reasoning and imagination go hand in hand and so the reasoning narrative comes from the misuse of the imagination in favor of perception (sight, hearing, or other sense including common sense).

The result is that people with OCD tend to get absorbed into a doubt without any evidence in the here and now.

Inferential Confusion

Inferential confusion is when a person does not trust their senses, themselves, or their common sense to reason and therefore, they put a lot of emphasis on remote possibilities instead of what is actually occurring in the here and now.

Once you see that your obsessional doubt is constructed based on some reasoning errors including the misuse of your imagination, your beliefs/doubts change naturally.

Once you recognize the 100% “made up” nature of the obsessional doubt/story you will experience a shift from OCD reasoning to non-OCD reasoning.

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

Adapted by Susan McKendry

Distrust of the Senses and Common Sense
Reality Based Information

+

Investment in Remote Possibilities
Hypothetical or Imagined Possibilities

=

Inferential Confusion

What is Metacognitive Therapy?

I-CBT is a metacognitive approach which means we focus on how you arrived or how you reasoned the way you did to arrive at your conclusions.

Recovery from OCD is about addressing the reasoning issues and of course the tricks and cheats that OCD uses to hijack your reasoning process.

We are going to stand outside of your OCD story and look at it objectively so we can see where you are getting tricked.

When you are inside the story, it feels logical and scary. You will have to step outside of the story to really see what is happening.

**It's like pulling
the curtain
back on the
magician!**

We are going up a level to the source of the reasoning problem because that is where the high jacking is happening.

I will show you a series of processes that will help you understand what is occurring and then how to change it.

When you see the reasoning behind what is happening and how your thoughts got stuck in the first place, everything falls apart.

You won't have the obsessional doubt any longer, you won't feel those unpleasant feelings and there will be no need to do compulsions because there will be no more doubt.

Let's get on an equal playing field with OCD

By understanding the process, you will be on equal playing field with OCD.

It is not about techniques. It is about a shift in your experience. It does not require willpower which leads to white knuckling. It requires a shift in your understanding of the problem.

When you can see how your mind works, it no longer becomes a whack-a mole game that keeps bringing you back to therapy.

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

The Role of Stories in OCD

In I-CBT we talk a lot about stories and specifically, your OCD story. As you know, these stories often feel scary, logical and credible.

That is the way OCD hijacks people.

We will use your story to help us do the work and to understand why this story is so scary for you.

Once you understand the process, you will see how OCD has tricked you to believe the story behind your doubt.

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

Adapted by Susan McKendry

"What if we could do more than just notice and ignore obsessions? More than just tolerate their existence. What if we could demystify the why and the how of an obsession without it becoming compulsive. What if we could spot the magicians sleight-of-hand before we get absorbed into the illusion that is obsession?"

Mike Heady