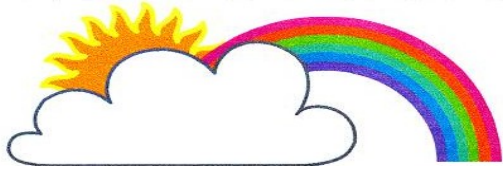


NEVER say NEVER



*In the midst of the seemingly endless storm,
look to the promise of the rainbow -
the rain shall not prevail!*

Winter 2019

Mindfulness and OCD

The idea and practice of mindfulness goes back thousands of years to Hindu and Buddhist traditions. In 1979, Jon Kabat-Zinn developed a program which he called “Mindfulness-Based Stress Reduction” (MBSR), which downplayed the connection between mindfulness and Buddhism, instead putting mindfulness in a scientific context. He defines it as “the psychological process of bringing one’s attention to the internal and external experiences occurring in the present moment, which can be developed through the practice of meditation and other training.”

Today, the practice of mindfulness is popular and widely used in many disciplines to enhance personal awareness and reduce stress. In recent years, it has become a significant tool in the treatment of OCD and other anxiety disorders through its application in ACT (Acceptance and Commitment Therapy) and DBT (Dialectical Behavior Therapy).

In this issue of *Never Say Never*, we look at the theory and practice of mindfulness and how we can use it to help us when confronted by OCD thoughts.

SPRING PROGRAM Mindfulness

Join us on Saturday, May 18th, 2019 at 1:00 for our Spring Program, to be held at Beaumont/Botsford Hospital in Farmington Hills. On that day, we will explore “**Mindfulness**,” how it can be used as a tool to help us see our obsessional thoughts and compulsive responses in a different light, and as a way to augment our ERP (Exposure and Response Prevention) practice. For more information, see our website ocdmich.org or our [Facebook](#) page. RSVP to ocdmich@aol.com or call 734-466-3105.

THE OCD FOUNDATION OF MICHIGAN

P.O. Box 510412
Livonia, MI 48151-6412

Telephone (voice mail): (734) 466-3105

E-mail: OCDmich@aol.com

Web: www.ocdmich.org

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NEVER say NEVER

is the quarterly newsletter of The OCD FOUNDATION OF MICHIGAN,
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Please note that the information in this newsletter is not intended to provide treatment for OCD or its associated spectrum disorders. Appropriate treatment and advice should be obtained directly from a qualified and experienced doctor and/or mental health professional. The opinions expressed are those of the individual authors.

To submit articles or letters, write or e-mail the OCDFM at the above addresses.

LIST OF SELF-HELP GROUPS

ANN ARBOR:

1st Thursday, 7-9 PM
St. Joseph Mercy Hospital Ann Arbor
Ellen Thompson Women's Health Center
Classroom #3
(in the Specialty Centers area)
5320 Elliott Drive, Ypsilanti, MI
Call Bobbie at (734) 522-8907 or (734) 652-8907
E-mail OCDmich@aol.com

DEARBORN:

2nd Thursday, 7-9 PM
First United Methodist Church
22124 Garrison Street (at Mason)
In the Choir Room (enter under back stairs)
Call Bobbie at (734) 522-8907 or (734) 652-8907
E-mail OCDmich@aol.com

FARMINGTON HILLS:

1st and 3rd Sundays, 1-3 PM
BFRB Support Group
Body-Focused Repetitive Behaviors
Trichotillomania and Dermatillomania
(Hair-pulling and Skin-picking)
Beaumont Hospital Botsford Campus
Administration & Education Center, Classroom C
28050 Grand River Ave. (North of 8 Mile)
Call Bobbie at (734) 522-8907 or (734) 652-8907
E-mail rlade9627@aol.com

GRAND RAPIDS:

Old Firehouse #6
312 Grandville SE
Call the Anxiety Resource Center
(616) 356-1614
www.anxietyresourcecenter.org

Anxiety Disorders

Meets every Wednesday, 4:30 to 5:30 pm and
7 to 8:30 pm (two groups offered at this time to keep
group size smaller)
A weekly support group open to anyone who has an
anxiety problem (including trichotillomania and
Obsessive-Compulsive Disorder).

Teen Anxiety Disorders

Meets every Wednesday, 4:30 to 5:45 pm
A weekly support group open to teens aged 14-18
who have an anxiety problem.

Open Creative Time

1st Wednesday, 6:00 to 7:00 pm
Take your mind off your worries by being creative.
Bring a project to work on or enjoy supplies that are
available at the ARC.

Social Outing Groups

Offered once a month.
Dates and times change.
Check the ARC website for current listings.

LANSING:

1st Monday, 7-8:30 PM
Delta Presbyterian Church
6100 W. Michigan
Call Jon at (517) 944-0477
E-mail jvogler75@comcast.net

LAPEER:

DISCONTINUED

PETOSKEY:

DISCONTINUED

ROYAL OAK:

NOW, TWICE A MONTH!

1st and 3rd Wednesdays, 7-9 PM
Beaumont Hospital, Administration Building
3601 W. Thirteen Mile Rd.
Use Staff Entrance off 13 Mile Rd.
Follow John R. Poole Drive to Administration Building
Park in the South Parking Deck
Meets in Private Dining Room
(If the building is locked, press the Security button next
to the door, tell them you are there for a meeting, and
they will buzz you in.)
Call Kevin at (248) 302-9569
E-mail kevinkuhn2015@gmail.com

FROM THE NEVER SAY NEVER ARCHIVES:

(Editor's note: This article first appeared in the Spring 2015 issue of *Never Say Never* and can be found online at www.ocdla.com/mindfulness-cbt-ocd-anxiety.html)

Mindfulness Based CBT for OCD and Anxiety

from the OCD Center of Los Angeles

Over the past few years, there has been an explosion of interest in the concept of "mindfulness" as it applies to mental health treatment. But most people, including many seeking help for OCD and related anxiety based conditions, are not exactly sure what mindfulness is, or how to apply it to their life.

Despite what some might suggest, mindfulness is not a new and simple technique that one can quickly implement in order to magically eliminate anxiety. It is a long-established philosophical tradition rooted in principles originally described in eastern philosophy. These principles have in recent years been adapted by psychotherapists who integrate some of the basic precepts of mindfulness with traditional Cognitive Behavioral Therapy (CBT). This growing interest in the combination of CBT and mindfulness presents those seeking help for OCD and other anxiety based conditions with two basic questions: *what is mindfulness and does it work?*

WHAT IS MINDFULNESS?

Mindfulness, as it applies to the treatment of Obsessive Compulsive Disorder (OCD) and other anxiety disorders, is perhaps most easily understood as developing the skill of non-judgmental awareness and acceptance of present-moment experience, including all of the unwanted thoughts, feelings, sensations, and urges that are at the heart of these conditions. What this means is that, from a mindfulness perspective, the individual's primary agenda ought not be to change or eliminate their unwanted thoughts, feelings, sensations, and urges, but rather to fully acknowledge and accept them.

Note that this does not mean to suggest that one should or must learn to enjoy these painful experiences. Rather, the aim of mindfulness is to recognize and accept that these uncomfortable experiences are transitory and inevitable aspects of human life. From a mindfulness perspective, not accepting these unwanted inner experiences is the source of much of our self-induced suffering. Furthermore, fully accepting the reality of their existence is more likely to lead to a reduction in our suffering than any attempts at resisting and controlling these experiences.

(Continued on page 5)

MINDFULNESS AND COGNITIVE BEHAVIORAL THERAPY

Some people have the mistaken belief that mindfulness is in some way a rejection of Cognitive Behavioral Therapy. On the contrary, mindfulness can be a refinement and expansion upon CBT. While traditional cognitive therapy teaches us to challenge the *content* of our distorted thoughts, mindfulness is more focused on challenging our *perspective* towards these thoughts. From a mindfulness perspective, the essential problem is our distorted belief that unwanted thoughts, feelings, sensations and urges are somehow automatically important and deserving of a strong behavioral response. But with mindfulness, the goal is to better recognize and accept that these transitory internal events, though uncomfortable, are merely a normal, predictable part of the human experience.

There is also a behavioral therapy component to mindfulness, which can be simply described as this: when faced with unwanted thoughts, feelings, sensations, and urges, it is best to make no effort whatsoever to avoid or control them. With mindfulness, the goal is to accept the presence of these unwanted experiences, and to act in a manner that is appropriate to the situation and in keeping with what we would actually like to do, rather than acting with the simple goal of short-term reduction of discomfort.

As the above demonstrates, mindfulness is to some extent both a cognitive and a behavioral process. Seen through the prism of traditional cognitive theory, the role of mindfulness is to help us learn to challenge and change our distorted beliefs about the importance of uncomfortable experiences. Likewise, from the perspective of traditional behavioral theory, the most mindful and effective long-term response to OCD and anxiety is to not perform the compulsive and avoidant behaviors commonly seen in these conditions, for doing so provides only a short-term reduction in our discomfort.

INTEGRATING MINDFULNESS AND CBT FOR THE TREATMENT OF OCD AND ANXIETY

The OCD Center of Los Angeles has long employed Mindfulness Based CBT for the treatment of OCD and related anxiety based conditions. From our perspective, mindfulness is a natural adjunct to traditional Cognitive-Behavioral Therapy, and seamlessly integrates with more traditional CBT techniques such as Exposure and Response Prevention (ERP) and Cognitive Restructuring.

The core principles of mindfulness have also been integrated with Cognitive-Behavioral Therapy in a number of other treatment modalities that are part of what is sometimes referred to as the "third wave" of CBT (the first two waves being traditional cognitive therapy and behavioral therapy). Some noteworthy examples of "third wave" Mindfulness Based CBT include:

- Acceptance and Commitment Therapy (ACT) - Originally developed by Steven Hayes, ACT focuses on choosing to willingly accept uncomfortable personal experiences, without avoidance or other efforts at con-

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trol, while making a commitment to living fully according to one's personal values.

- Jeffrey Schwartz' Four Steps - Originally developed as a treatment for OCD, Schwartz' Four Step method, as described in his book Brain Lock, focuses on learning to non-judgmentally observe unwanted thoughts, feelings, sensations, and urges from the position of an "impartial spectator".
- Dialectical Behavioral Therapy (DBT) - Originally developed by Marcia Linehan as a set of tools to be used in treating Borderline Personality Disorder, its core principle of "radical acceptance" of unwanted feelings is completely applicable to the treatment OCD and other anxiety based conditions.
- Mindfulness Based Cognitive Therapy (MBCT) - Originally developed as a treatment for depression, its primary goal is for clients to see unwanted thoughts and feelings as "passing events in the mind rather than identifying with them or treating them as necessarily accurate readouts on reality".

Each of these treatment modalities asks us to change our relationship to our thoughts, as well as our behavioral reaction to them. Just because we have a thought doesn't mean that the thought is particularly meaningful, or accurate, or indicative of something "real" or "important". On the contrary, much of what we think is inaccurate, mundane, benign, and/or simply unimportant. For example, if someone with OCD has an obsessive thought about contamination, that doesn't mean that the thought is accurate or meaningful. It also doesn't mean that the thought merits a behavioral response.

From a mindfulness perspective, unwanted thoughts, feelings, sensations, and urges are neither good nor bad - they just are. From the perspective of third wave therapies, the goal is not to control or avoid these experiences, but to learn to peacefully co-exist with them. Put another way, the goal is to allow these unwanted personal experiences to exist, without behaviorally over-reacting to them.

IS MINDFULNESS EFFECTIVE FOR THE TREATMENT OF OCD AND ANXIETY?

Our clinical experience over the years has been that that most clients report significant improvement in their symptoms using a treatment protocol that combines mindfulness and CBT. And while the application of mindfulness for the treatment of OCD and anxiety disorders is relatively new, there is already a growing pool of research data to suggest that it is beneficial in the treatment of these conditions, including a 2008 study that found mindfulness to be beneficial for the treatment of OCD.

There have also been studies that have specifically found Acceptance and Commitment Therapy (ACT) to be successful in the treatment of OCD, Trichotillomania, and Dermatillomania. And researchers at Temple University, Yale University, and Kent State University recently reported preliminary findings of a joint study of mindfulness for the treatment of Generalized Anxiety Disorder (GAD). Initial results have been promising, with subjects exhibiting "dramatic reductions" in anxiety.

OCD and Mindfulness

By Janet Singer

(This article can be found at psychcentral.com/lib/ocd-and-mindfulness.)

We hear a lot about the concept of mindfulness these days. Simply put, mindfulness is the act of focusing on the present moment in a nonjudgmental way. It involves noticing and accepting what is.

If you or a loved one suffer from obsessive-compulsive disorder, I'm wondering if you have the same thoughts about this definition of mindfulness as I do. To me, it seems as if it is the exact opposite of obsessive-compulsive disorder.

Focusing on the present moment? Those with OCD rarely do that. Instead, they either find themselves immersed in the world of "what ifs," worrying about everything that might go wrong, or agonizing over things they think might have already gone wrong. Lots of thinking about the future and the past — not so much about the present.

And in a nonjudgmental way? If you have OCD, you're probably laughing right now, because chances are you judge yourself all of the time. Whether it's blaming yourself for bad things that might happen in the future or that possibly happened in the past, or thinking of what you did wrong or will do wrong or should have done differently, those with obsessive-compulsive disorder are continually assessing their thoughts and actions. And because they often deal with cognitive distortions, these assessments are typically incorrect.

One type of [cognitive distortion](#) is thought-action fusion, where people believe that thinking bad thoughts is akin to performing the action associated with the thought. Thought-action fusion might also involve the belief that thinking certain thoughts can somehow make them come true.

For example, new moms sometimes have thoughts of hurting their babies. Most will acknowledge the thoughts as having no meaning and let them go. But moms dealing with thought-action fusion might be horrified and immediately consider themselves terrible people, unfit parents, and a danger to their children, because what kind of mother thinks that way? Judgment, judgment, judgment.

In spite of the fact (or maybe because of it) that it is, in many ways, the opposite of OCD, most OCD sufferers I know who practice mindfulness find it very helpful in fighting their disorder. To be able to focus on what is really happening in any given moment, as opposed to dwelling on the past or anticipating the future, takes away the power of OCD. So while exposure and response prevention (ERP) therapy remains the front-line treatment for OCD, mindfulness also is a great tool to use. It can help with ERP as well as with the anxiety and fear that come along with OCD.

While the concept of mindfulness is simple, it is not always easy to put into practice. It takes discipline, awareness, practice and perseverance, but it is so worth it. I myself, over the past year or so, have been working on becoming more mindful in my own life. While I don't have OCD, I am quite

(Continued on page 8)

prone to “what ifs,” and when I find myself heading down that road I now easily (usually) stop myself and focus on the present moment. An act so simple, yet so powerful.

And while I welcome the calm that mindfulness brings me, I am even more thankful for an additional unexpected benefit: gratitude. Focusing on the present allows me to stop and catch my breath, and when I do that I somehow become keenly aware of all the good in my life. Not in the past, and not in the future, but right now. Because, for all of us, right now is what really matters.

Janet Singer's son Dan suffered from OCD so severe that he could not even eat. After navigating through a disorienting maze of treatments and programs, Dan made a triumphant recovery. Janet has become an advocate for OCD awareness and wants everyone to know that OCD, no matter how severe, is treatable. There is so much hope for those with this disorder. Janet, who uses a pseudonym to protect her son's privacy, is the author of [Overcoming OCD: A Journey to Recovery](#), published in January 2015 by Rowman & Littlefield. Her own blog, www.ocdtalk.wordpress.com, has reached readers in 167 countries. She is married with three children and resides in New England.

Words of Wisdom

“Don't believe everything you think.” - Allan Lokos

“Change your thoughts and you change your world.”
- Norman Vincent Peale

“If you are depressed you are living in the past. If you are anxious you are living in the future. If you are at peace you are living in the present.”
- Lao Tzu

“When you change the way you look at things, the things you look at change.”
- Dr. Wayne Dyer

“With every experience, you alone are painting your own canvas, thought by thought, choice by choice.”
- Oprah Winfrey

Mindfulness and Cognitive Behavioral Therapy for OCD

by Jon Hershfield, MFT and Tom Corboy, MFT

If you suffer from obsessive compulsive disorder (OCD) and you take the brave step of getting professional help, you're likely to start hearing the word "mindfulness" used in reference to some part of your treatment. Mindfulness is really "*in*" right now, and there's good reason for this. Over the years, research and clinical experience has shown mindfulness to be an important tool in addressing a number of mental health issues. More recently, many who specialize in treating OCD are finding that mindfulness may be useful at improving the effectiveness of cognitive behavioral therapy (CBT). However, there are concerns that mindfulness strategies can be used incorrectly as a "neutralizing" technique, or, in other words, that it may "cancel out" or weaken the effectiveness of traditional exposure and response prevention (ERP) treatment. So, we are left with two questions: What is mindfulness? And how can it be used to improve, not take away from, traditional CBT treatment of OCD?

In general, mindfulness means paying attention to the present moment without judgment. When you have OCD, this is no easy feat. The present moment can include painful and confusing intrusive thoughts, feelings, and sensations that seem to lend themselves to judgment. Rather than attempting to neutralize (or get rid of) these internal experiences with compulsions, mindfulness asks that we allow the moment to stay as it *is*. In this way, mindfulness is not very different from exposure with response prevention (ERP). In ERP, you are being asked to confront your triggers and resist responding to them with compulsions. In mindfulness, you are being asked to simply remain *aware* when you are triggered, to accept the discomfort it causes, and to resist trying to change it with compulsions. This technique can be strengthened by accepting that the thoughts are simply mental events, capable of being observed without being automatically thought of as warning signs or threats of danger. However, mindfulness may get in the way of the therapeutic process when the concept of "it's just a thought" instead becomes a mantra used to reassure oneself that one's fears will not come true.

While a chicken-and-egg debate may be present in the clinical community over which should come first — behavioral change through ERP, or a change in perspective through an acceptance-focused approach (for an interesting discussion on the subject, see Grayson's 2013 article, "ACT vs. ERP for OCD," and its subsequent follow-ups) — our shared clinical experience suggests three main areas in which mindfulness can be used along with traditional CBT to boost the effectiveness of CBT. In other words, an "*and*" approach instead of an "*either/or*" approach can improve these three elements of CBT:

Acceptance – OCD wants you to be afraid of your internal world, driving you to do compulsions to push thoughts away, which then keeps the disorder alive. Psycho-education on how the brain interacts with the mind is often the first step in introducing the CBT model to someone seeking treatment. Understanding this interaction and the obsessive-compulsive cycle is essential for preparing someone to engage in the therapy. Thus, understanding first what it means to be mindful can be as useful as understanding what it means to be cognitive or behavioral in your approach to treatment. To be "mindful" means observing and accepting unwanted thoughts, feelings, and physical sensations with-

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out judging or attaching meaning to them or trying to stop or change them. This can be implemented moment to moment during a person's day, simply by noticing what's going on inside as you go about your day (for example, noticing the sound of running water during a shower or the sensation of your body pressing against the seat you are in). Formal meditation — the practice of setting aside a specific period of time to focus on an “anchoring concept,” such as one's breathing or heartbeat, while letting the internal world come and go without judgment or analysis— also provides a strategy to practice confronting OCD.

Assessment – Traditional cognitive therapy focuses on figuring out the distorted thinking at the heart of OCD. The use of automatic thought records (writing down your thoughts to review with your therapist) and learning to notice and identify cognitive distortions (problematic styles of thinking and beliefs that are getting in your way) offer those with OCD a way to assess how they are *thinking* about their experience without attempting to get rid of thoughts or push them down. Consider the difference between trying to mindfully accept the thought “*Because my hands are not 100% clean, I am going to get a terrible disease*” versus “*I don't know if my hands are clean in this moment and can't predict the future.*” By helping people be more aware of the way in which they are thinking about their uncomfortable thoughts, feelings, and sensations, mindfulness can help people redirect themselves away from their desire to do compulsions. Instead of challenging the likelihood of fears coming true, one can challenge the seriousness with which they understand their internal world in the first place by using mindfulness concepts.

Action – Effective action against OCD ultimately means confronting one's feared thoughts, feelings, and sensations using ERP. This behavioral component of CBT — intentionally exposing one's self to the very thoughts and situations that cause so much suffering — naturally increases the urge to do compulsions. Mindfulness strengthens ERP by encouraging acceptance of one's uncomfortable reactions to exposures, thus reducing the powerful draw of compulsive behaviors. Rather than being used as a tool for resistance to compulsions, the inclusion of mindfulness in ERP allows for an openness to discomfort — a curiosity toward what happens when you lean *in* to it instead of running away.

Research Supporting Mindfulness for the Treatment of OCD

With any update to OCD treatment, clinical experience is going to have a longer history than clinical research. However, a growing pool of research coming out over the last few years suggests that those who are adding mindfulness into treatment for OCD are on the right track:

- A 2013 study (Wahl) examined the effectiveness of mindfulness and meditation compared to the use of distraction in 30 patients with OCD who were doing brief exposure to their unwanted thoughts. The results showed that those who used mindfulness skills (i.e. letting thoughts come and go without judgment) felt less of an urge to neutralize thoughts with compulsions, while those who used only distraction strategies (i.e. trying to think of something else) saw no change in their urge to use compulsions.
- A 2012 German study (Hertenstein et al.) researched the impact of an 8-week mindfulness-based group therapy pro-

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gram on adults with OCD. All study participants had already completed a course of ERP within a two-year period before the study began. Of the 12 participants, 8 reported having fewer OCD symptoms as a result of the group therapy program. Additional benefits reported by study participants included an increased willingness and ability to allow unpleasant emotions to surface, feeling able to handle these emotions more flexibly, a sense of living more consciously in the present, a calmer attitude towards their OCD, and generally improved mood and sleep.

- A small 2010 study (with only 3 participants) on intrusive thoughts in OCD (Wilkinson-Tough) looked at whether mindfulness-based therapy could help those who were using thought suppression (that is, trying to stop thinking certain things) and experiencing thought-action fusion (in other words, believing that thinking something in your head means it actually happens in real life). Three participants received a six-session mindfulness-based intervention with an emphasis on using mindfulness skills every day. Following treatment, all participants received improved scores on the Yale-Brown Obsessive Compulsive Scale (Y-BOCS), an assessment tool used to figure out which OCD symptoms are present and how severe they are.
- A 2010 study on group treatment for OCD (Fairfax) explored several different clinical interventions that could strengthen evidence-based practices and found that the participants responded well to mindfulness-based interventions in particular. The authors suggested that the use of mindful awareness and strategies focused on attention may support efforts to participate in ERP.
- A 2008 Dutch study (Hanstede et al.) examined the impact of mindfulness meditation on a group of 17 university students. Subjects were taught the mindfulness techniques of “meditative breathing, body-scan, and mindful daily living,” as applied to OCD, over the course of eight one-hour sessions. Researchers found that mindfulness meditation had “a significant and large effect” on OCD symptoms, specifically on thought-action fusion (again, the belief that having a thought is the same as acting on the thought), and the ability to “let go” of unwanted thoughts.
- A 2006 study (Twohig et al.) explored the effect of Acceptance and Commitment Therapy (ACT), a treatment modality that in part includes a focus on developing mindfulness skills and participants’ willingness to accept and tolerate unwanted obsessive thoughts. Study participants reported decreased avoidance of uncomfortable or unwanted internal experiences (negative thoughts and feelings), decreased believability of obsessions, and decreased anxiety and depressive symptoms, as well as fewer compulsions by the end of treatment for all participants.

Mindfulness, the ability to remain in the presence of the moment (even the unpleasant moment), also seems to be a very flexible approach. OCD sufferers who struggle with intrusive thoughts of a sexual or aggressive nature may find that a well-developed ability to watch thoughts go by makes the difference between desperately using compulsions to make the thoughts go away, or instead successfully managing their OCD. But, a person trapped by an endless cycle of washing, checking, or cleaning is experiencing exactly the same struggle with accepting thoughts, feelings, and sensations as people with intrusive thoughts. So, mindfulness is really for anyone who wants to stop feeling like what is going on inside their mind is a burden. It’s hard to imagine anyone with OCD who would wish to continue feeling that way.

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*Jon Hershfield, MFT, is the associate director of the UCLA Child OCD Intensive Outpatient Program at Resnick Neuropsychiatric Hospital, and is a psychotherapist specializing in the treatment of OCD and related disorders using **mindfulness-based cognitive behavioral therapy (MBCBT)**.*

Tom Corboy, MFT, is the executive director of the OCD Center of Los Angeles, where he is a licensed psychotherapist specializing in MBCBT for the treatment of OCD and related anxiety-based conditions.

*Hershfield and Corboy are also the authors of the new book, *The Mindfulness Workbook for OCD: A Guide to Overcoming Obsessions and Compulsions Using Mindfulness and Cognitive Behavioral Therapy* (New Harbinger Self-Help Workbooks, 2013). This article was initially published in the Spring 2014 edition of [*the OCD Newsletter*](#).*

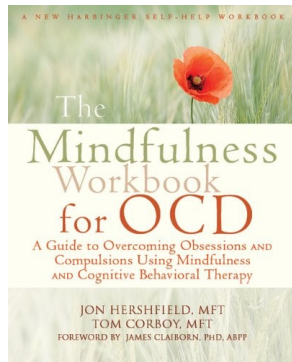


“Never fear the shadows, they simply mean there’s a light shining somewhere nearby.”

The Mindfulness Workbook for OCD

A Book Review

by Toni Lupro



In Spring 2017, I found myself in the precarious position of becoming a professional patient. I had been struggling to balance the demands of medical school with the debilitating effects of OCD and something had to give. With the support of my husband, I took a leave of absence from school and, for the next few months, I focused on my recovery. I met with psychologists, psychiatrists, and even social workers and joined a long list of classes and groups on anxiety, cognitive restructuring, exposure practices, and more. Each experience offered me better insight into my condition, but one practice took me by surprise: mindfulness.

Like many others, I had my doubts about mindfulness and meditation, but when my clinic suggested an introductory program, I thought, “What do I have to lose?” Nothing, it happened, but there was much to gain. Through this experience, I was introduced to ***The Mindfulness Workbook for OCD: A Guide to Overcoming Obsessions and Compulsions Using Mindfulness and Cognitive Behavioral Therapy*** (© 2013) by Jon Hershfield, MFT, and Tom Corboy, MFT. I began to learn how to use the calming and comforting effects of mindfulness and meditation as an active part of my OCD recovery. This practice remains helpful in navigating life with OCD today, so I’m excited to share my review and experiences and hope it helps others as much as it has me.

The Official Description:

“If you have obsessive-compulsive disorder (OCD), you might suffer from overwhelming fears and fixations that keep you from truly enjoying your life. Sometimes you may even feel like a prisoner, trapped with your intrusive thoughts and ruminations. If you’ve tried different treatment options with little success, don’t lose hope. You might benefit from a mindfulness-based approach.

*Combining powerful mindfulness practices with cognitive behavioral therapy (CBT), **The Mindfulness Workbook for OCD** offers practical and accessible tools for managing the unwanted thoughts and compulsive urges that are associated with OCD. With this workbook as your guide, you will develop present-moment awareness, learn to challenge your own distorted thinking, and stop letting your OCD symptoms get in the way of the life you deserve.”*

The Authors:

The authors, Jon Hershfield and Tom Corboy, are both licensed in Marriage and Family Therapy and active psychotherapists specializing in OCD and its treatment using Mindfulness Based Cognitive Behavioral Therapy (MBCBT). Foreword writer James Claiborn, PhD, ABPP, is an OCD expert and Founding Fellow of the Academy of Cognitive Therapy with a more than ten year contribution to the

(Continued on page 14)

field of cognitive behavioral therapy. His foreword provides insight to the relationship between mindfulness and this evidenced based practice.

But perhaps more powerful than the expertise behind this resource is the personal experience: Jon Hershfield is more than a well-respected professional; he's a professional who understands on a personal level. Hershfield himself suffers from OCD and writes with the warmth of a fellow recovering peer. There are a lot of self help books on the market, but not all of them are helpful or relatable. That's where this book differs. Hershfield has been in our shoes; he knows it's hard, but he also knows it's possible to live a life free of the constraints of our disorder. Because the author understands, the readers feel understood on the deepest level.

The Response:

Since *The Mindfulness Workbook for OCD* was published in 2013, it has received positive editorial reviews from providers and patients alike. It currently has an Amazon rating of 4.6/5 stars based on 134 customer reviews and a Goodreads rating of 4.4/5 stars based on 243 reviews.

The Review:

The Mindfulness Workbook for OCD introduces a powerful new treatment model known as Mindfulness Based Cognitive Behavioral Therapy (MBCBT). Those familiar with OCD have probably heard of Exposure and Response Prevention (ERP), the current gold standard for OCD treatment. Recognized as a form of Cognitive Behavioral Therapy (CBT), ERP is supported by research as the most effective modality in overcoming debilitating obsessions and compulsions. However, ERP can also be incredibly challenging for patients. Furthermore, the current shortage of mental health providers, especially OCD specialists, can pose a barrier for those seeking treatment. In fact, studies have found that the average person with OCD lives with its devastating effects for a staggering 14 years before finding effective help.

That's where MBCBT can help. Over the past decade, CBT has been a major focus of research in the field of psychology. Recent developments have revealed the benefits of integrating this evidence-based practice with the more traditional practice of mindfulness. These holistic techniques and strategies have been proven to be successful for the management of unwanted thoughts, emotions, and even physical sensations, all of which are at the heart of OCD ("the doubting disease"). *The Mindfulness Workbook for OCD* authors, Jon Hershfield and Tom Corboy, center their careers on this topic and this landmark publication is the first to focus exclusively on MBCBT.

Mindfulness, at the simplest level, teaches us to bring our attention to the present moment. In this process, we learn to be an impartial witness to our experiences and to focus on objective fact without editing it with subjective thoughts and emotions. Mindfulness and meditation, then, are not about relaxation per se, but acceptance of the moment, and learning to recognize thoughts, emotions, ideas, desires, experiences, etc., both pleasant and unpleasant, without becoming attached. It teaches us to recognize a thought, name the thought, and accept the thought, free of expectations from the past and future and free of the obligation to accept or reject the thought in the immediate future. Thus, mindfulness teaches us patience and builds our trust in the truth.

(Continued on page 15)

I ordered *The Mindfulness Workbook for OCD* for this mindfulness-based approach, but I was also excited to receive it for its structure. Over the years, I had read a lot of material on OCD — books, articles, online forums, etc. — but with a newfound drive to overcome this thing once and for all, it felt best to do something more hands-on. I wanted to work through the workbook; I didn't want to be passive when reading it but active in doing the exercises. This is another area where this book shines. The workbook includes purposeful content and background, but, more importantly, it serves as an interactive resource with simple to use tools and techniques. It asks us, the readers, to consider our current obsessions and compulsions and teaches us to dissect them. Because doubt is such a central component of OCD, the practice of mindfulness serves to bring us to the present so that we can focus on the objective truths, while also removing guilt, shame, and judgment from the situation. The valuable insights and hands-on practice is both empowering and manageable.

The book includes three distinct parts:

1. **Mindfulness:** The book begins with an introduction to mindfulness for those unfamiliar with the basic principles. The authors discuss the OCD mind and the tendency for sufferers to treat “thoughts as threats and feelings as fact.” Cognitive distortions are central to the disorder, with irrational thought patterns driving our obsessions and compulsions. Mindfulness teaches us to challenge this by sitting with the thoughts and emotions and accepting their existence without become consumed. Humans have little to no control over our thoughts, but we do have control over our behavior. In OCD, this means that obsessions themselves can be difficult to stop, but the compulsions are a choice. The workbook introduces the Thought Record, a form that allows you to record obsessions and compulsive behaviors, as well as the emotions around them. It is a simple mindfulness tool that can be used as we learn to disengage from negative thought processes. To begin, readers are asked to consider their current obsessions and compulsions, with the understanding that the focus of these can and often does change over time, as well as situations avoided as a result. These simple steps allow you to discover and evaluate the beliefs supporting these thoughts and consider healthier alternatives. It is a very effective tool to help us disengage from the negative circular processes we often find ourselves in.

2. **Mindfulness and treating OCD:** The next section is where things get specific as the authors cover the major forms of OCD, as well as some of the less discussed forms, and offer specific examples and techniques for using mindfulness to overcome the related obsessions and compulsions. These sections include: Checking OCD, Contamination OCD, Harm OCD, “Just Right” OCD, Pedophile OCD, Relationship OCD, Religious OCD, Sexual Orientation OCD, and Sensorimotor OCD.

3. **Mindfulness and living with OCD:** In the final section, the authors discuss the effects of living with OCD, from diagnosis to treatment to life after treatment. For example, the book provides guidance on dealing with the initial diagnosis and the advantages and disadvantages of sharing and explaining that diagnosis to others. On the other side, there is consideration of life post-treatment, including the common remission and relapse pattern and how to address it. Finally, the authors share outside resources for healing, including more hands-on options like discussion boards.

(Continued on page 16)

The final verdict? I don't think this will come as a surprise, but I thoroughly enjoyed *The Mindfulness Workbook for OCD* for many reasons. Hershfield's personal experience translated to a soft, positive, and respectful approach. His words resonated with me and helped me feel less alone, which is a powerful thing on its own. Despite a previous interest in mindfulness, I also appreciate the author's efforts to address the specific forms of OCD and provide exercises tailored to specific obsessions and compulsions. In the time since reading this book, I have continued to use mindfulness tools in my OCD recovery. It's not always easy, especially with the chronic, repetitive nature of the disorder, but there's something powerful about having the simple rules of mindfulness to fall back on. Even when the intrusive thoughts shift in content, I can rest assured that it's all interrelated and use mindfulness to observe rather than react. I've learned to remind myself, "This is an OCD thought. It's just a thought."

In the end, I recognize the importance of a well-rounded treatment plan and have myself benefited from a combination of Exposure and Response Prevention therapy and pharmacotherapy, but I strongly believe that mindfulness practices contribute to my success in overcoming the most debilitating obsessions and compulsions. So while I support and encourage the use of professional resources, I cannot recommend mindfulness enough for better health and well-being, and *The Mindfulness Workout for OCD* is an accessible, digestible, and reflective guide for beginners.

Where To Find The Workbook:

Interested in learning more about practical, concrete mindfulness tools to use in your OCD recovery? *The Mindfulness Workbook for OCD* is available in both paperback and electronic forms via most major retailers (ISBN: 1608828786). It can be found on Amazon at www.amazon.com/Mindfulness-Workbook-OCD-Overcoming-Compulsions/dp/1608828786

Further Resources:

Author and fellow OCD sufferer Jon Hershfield has since published a second book on the matter, *Everyday Mindfulness for OCD: Tips, Tricks, and Skills for Living Joyfully* (© 2017), with co-author Shala Nicely, LPC. Hershfield is also a recurring guest on the hit podcast *The OCD Stories* by Stuart Ralph, including an interview about his most recent book.

Toni Lupro is a recovering OCD sufferer, a medical student aiming to specialize in psychiatry, and a valuable member of The OCD Foundation of Michigan's Board of Directors.

Want More Mindfulness and Meditation?

Free Resources

Does this newsletter resonate with you? Do you want to learn more about mindfulness and meditation? You're in luck! Mindfulness and meditation related content is becoming more and more accessible, and at no to low cost too. OCDFM is sharing some of the most popular free resources out there to help bring mindfulness into your daily life.

PROFESSIONAL MEDIA

Let's start with the media sources we all know and love: mobile applications, podcasts, and film.

Mobile Applications:

Check out these mobile applications to cultivate mindfulness via guided meditations right from your phone. There are even options to track your progress and set reminders. Below are some of the highest rated apps available:

Headspace
Calm
InsightTimer

Note: These apps are all free to download and offer several free guided meditations, but there are also in-app purchases available if you find yourself wanting more. InsightTimer currently has the widest collection with over 15,000 free guided meditations.

Podcasts:

Interested in exploring mindfulness in more depth? These audio podcasts include guided meditations while also discussing mindfulness as a concept and offering examples for how we can apply the philosophy to real life situations. You can download a single episode or subscribe for more consistent content. The best part? Podcasts are available online or via mobile, so you can even listen and learn hand's free while doing chores, running errands, or getting ready for the day.

10% Happier with Dan Harris (ABC News): ABC's Dan Harris is a former mindfulness and meditation skeptic who shares a clear and simple approach to the practice. His podcast features talks with teachers, neuroscientists, and mental health experts.

(Continued on page 18)

On Being with Krista Tippett (On Being Studios): The On Being Project is a “public life initiative” using multiple forms of media to promote healing and other grounding virtues. Born as part of the larger project, Krista Tippett’s radio show and podcast has an enormous reach with over 200 million downloads.

Tara Brach (Tara Brach): Dr. Tara Brach is an international meditation teacher who addresses the importance of mindfulness and meditation in healing from emotional suffering. Her weekly podcast includes a guided meditation and talk about the practice.

Documentaries:

Looking to explore the world of mindfulness with something more long form? Mindfulness-related material is becoming increasingly popular on most streaming sites, but there’s one piece that stands out among the crowd:

The Secret (2006): This film, and the subsequent book, explore the profound effects of our thoughts. Based on the idea known as the law of attraction, *The Secret* is now one of the world’s best-selling books. Dive into the documentary for a series of interviews exploring this claim.

SOCIAL MEDIA

Want something less formal? Don’t discount personal blogs and popular social media websites like Instagram and YouTube!

Personal Blogs:

Personal blogs can offer the best of both worlds: the authors provide helpful content, but the less formal platform also allows for direct interaction with the audience (readers).

The Blissful Mind: Catherine is a writer, coach, and the creator of The Blissful Mind where she shares content intended to help readers improve their mindset.

Mindful Minutes: Melissa is also a mindfulness writer, coach, and teacher. On Mindful Minutes, she uses her experience as a leadership coach and meditation and yoga teacher to help people find more meaning and stillness in life.

Embracing Simple: Christina is the creator of Embracing Simple, a blog born from her passion for mindful and intentional living.

(Continued on page 19)

Instagram Accounts:

Instagram might be best known for filtered pictures, but there's more to the platform, and the following mindfulness-based accounts are a shining example of that:

@mindfulmft (231K followers): Vienna Pharaon is a Licensed Marriage and Family Therapist in NYC.

@sharonsalzberg (45.7K followers): Sharon Salzberg has been teaching meditation since 1974 and the author of ten books and host of a mindfulness podcast.

@saraauster (21.7K followers): Sara Auster promotes mindfulness through sound baths, an ancient and holistic approach to relaxation and healing. Her profile states: "Shifting the way the world engages with the act of listening by using sound as a tool to facilitate reflection, connection and change."

YouTube Videos:

Last but not least, there is no shortage of free guided meditation videos on YouTube and other video-sharing websites. The following YouTube channels in particular offer free educational content on a regular basis with videos uploaded weekly:

The Mindful Movement: "Here at the Mindful Movement, we are an oasis where you can come to tap into your inner calm, develop a positive mindset and heal from the stress that's blocking your fulfillment. We offer guided meditation, visualizations, and hypnosis as well as Yoga, Pilates and a variety of mindful movement practices to help you live mindfully, move well, and feel great!"

Tara Brach: "Hear about the power of meditation to transform people's lives; what people have learned, how they've struggled, why they began and how it has created refuge in their lives."

Thanks to our Board member Toni Lupro for compiling this list of resources for us.

PARTIAL HOSPITALIZATION PROGRAMS

There is a treatment option available for adolescents and adults in many areas that is often not known or considered by individuals who are struggling with OCD, anxiety, or depression. Partial Hospitalization Programs (PHP) are intensive programs offered by hospitals and clinics, and can benefit those who need more help than traditional outpatient settings can provide. They typically run five days a week, from 8 or 9 am to 3 or 4 pm, and can include group therapy, private time with a psychiatrist, art or music therapy or other activity time, and education programs. They usually include lunch, and some include transportation. Here, we list some of these programs for your information.

St. Joseph Mercy Hospital, Ann Arbor, MI

Adult Partial Hospitalization Program, 734-712-5850

www.stjoesannarbor.org/AdultPartialHospitalizationProgram

Adolescent Partial Hospitalization Program, 734-712-5750

www.stjoesannarbor.org/AdolescentPartialHospitalizationProgram

Beaumont Hospital, Royal Oak, MI, 248-898-2222

www.beaumont.edu/centers-services/psychiatry/partial-hospitalization-program

St. John Providence Hospital, Southfield, MI, 800-875-5566

www.stjohnprovidence.org/behavioral-health

New Center Community Services, Detroit, MI

www.newcentercmhs.org/partial-hospitalization-program

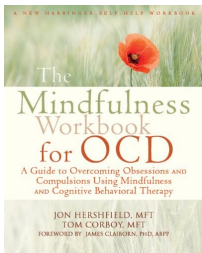
Allegiance Health, Jackson, MI, 517-788-4859 or 517-789-5971

www.allegiancehealth.org/services/behavioral-health/services/partial-hospitalization-program

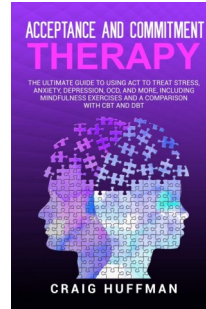
New Oakland Child-Adolescent & Family Center, 5 locations in tri-county area, 800-395-3223

www.newoakland.org/mental-health-services/face-to-face-day-program.html

SUGGESTED READING

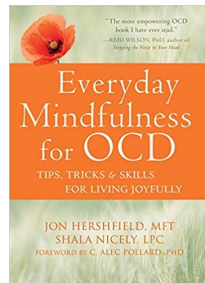


Jon Hershfield MFT and
Tom Corboy MFT
*The Mindfulness Workbook for OCD:
A Guide to Overcoming Obsessions
and Compulsions Using Mindfulness
and Cognitive Behavioral Therapy*
New Harbinger Publications, 2013
ISBN 978-1608828784

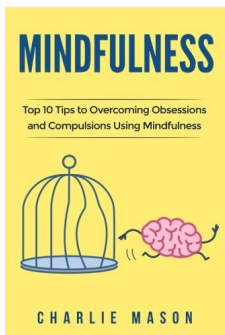
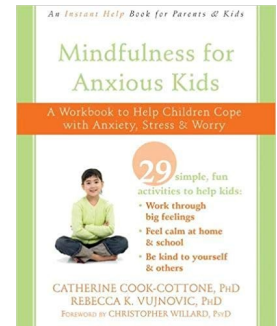


Craig Huffman
*Acceptance and Commitment Therapy:
The Ultimate Guide to Using
ACT to Treat Stress, Anxiety, De-
pression, OCD, and More, Including
Mindfulness Exercises and a Com-
parison with CBT and DBT*
Independently published, 2019
ISBN 978-1794222434

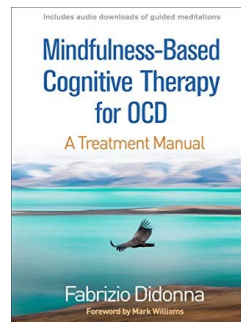
Jon Hershfield MFT and
Shala Nicely LPC
*Everyday Mindfulness for OCD:
Tips, Tricks, and Skills for Living
Joyfully*
New Harbinger Publications, 2017
ISBN 978-1626258921



Catherine Cook-Cottone PhD
and Rebecca K. Vujnovic PhD
*Mindfulness for Anxious Kids:
A Workbook to Help Children
Cope with Anxiety, Stress, and
Worry*
Instant Help, 2018
ISBN 978-168403131



Charlie Mason
*Mindfulness: Top 10 Tips Guide to
Overcoming Obsessions and Com-
pulsions & Compulsive Using
Mindfulness*
Create Space, 2017
ISBN 978-1978168602



Fabrizio Didonna
*Mindfulness-Based Cognitive
Therapy for OCD: A Treatment
Manual*
Guilford Press, Aug 28, 2019
ISBN 978-1462539277

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PROFESSIONAL DIRECTORY

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Treatment professionals, what better way to find the OCD sufferers who need your help, and to give them a way to find you. Just place your business card in *Never Say Never*, the quarterly newsletter of The OCD Foundation of Michigan. For just \$25.00 per issue, your card can be in the hands of the very people who need you most. It's a great way to reach out to the OCD community, and at the same time support The OCD Foundation of Michigan. Send your card to OCDFM, P.O. Box 510412, Livonia, MI 48151-6412, or e-mail to OCDmich@aol.com. For more information, call 734-466-3105.

Antonia Caretto, Ph.D., PLLC

Licensed Clinical Psychologist
www.BeTreatedWell.com
(248) 553-9053

Office hours by appointment
25882 Orchard Lake Road #201
Farmington Hills, MI 48336

P.O. Box 2265
Dearborn, MI 48123

Laurie Krauth

MA, PLC
Psychotherapist



2002 Hogback Road, Suite 15
Ann Arbor, MI 48105

(734) 973-3100
LKrauth@comcast.net

JAMES A. GALL, PH.D., PLLC

LICENSED PSYCHOLOGIST
SPECIALIST IN THE TREATMENT OF
ANXIETY DISORDERS

TELEPHONE (810) 543-1050
FAX (248) 656-5004

950 W. AVON, STE. 3
ROCHESTER HILLS, MI 48307

JESSICA PURTAN HARRELL, PH.D.

LICENSED CLINICAL PSYCHOLOGIST
(248) 767-5985

33493 W. 14 MILE RD.
SUITE 130
FARM HILLS, MI 48331

DRJESSICAHARRELL@GMAIL.COM
WWW.MI-CBT-PSYCHOLOGIST.COM

Laura G. Nisenson, Ph.D.

Licensed Psychologist

425 E. Washington
Suite 101D
Ann Arbor, MI 48104

(734) 623-0895

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The OCD Foundation of Michigan Membership Application

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May we send you newsletters, notices and announcements via e-mail? _____

- ☐ Enclosed please find my check for \$20 annual membership fee.
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Make check or money order payable in U.S. funds to
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P.O. Box 510412
Livonia, MI 48151-6412

3/2019

Please Don't Throw Me Away

You've finished reading me and don't need to keep me anymore. Or worse (boo-hoo), you don't need me and don't even want me. In either case, please take me somewhere where I can help someone else. Take me to your library. Take me to your doctor, therapist, or local mental health clinic. Take me to your leader. But please, please, don't throw me away.



The OCD Foundation of Michigan Mission Statement

- ♦ To recognize that Obsessive-Compulsive Disorder (OCD) is an anxiety-driven, neurobiobehavioral disorder that can be successfully treated.
- ♦ To offer a network of information, support, and education for people living with OCD, their families and friends, and the community.

**IF YOU WOULD LIKE TO BE ADDED TO OR DELETED FROM THE MAILING LIST
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The OCD Foundation of Michigan
P.O. Box 510412
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