

INTRUSIVE THOUGHTS

A NEWSLETTER FROM THE DEPARTMENT OF PSYCHIATRY'S OCD CARE TEAM

HELLO ONE AND ALL!

Somehow our second newsletter is already here and I can't believe how fast time has gone by. Thank you all for your positive feedback on our first newsletter. We are glad to have you with us on this newsletter journey. This quarter's newsletter focuses on self-compassion, love, and relationships. So, let's start with a necessary piece to managing OCD: self-compassion!

Self-compassion is the ability to be kind to yourself. Whether it's by giving yourself slack for not completing a task, giving yourself permission to feel your emotions, or setting boundaries, self-compassion is all about extending the same compassion to yourself that you would extend to a friend. Self-compassion is a necessary tool in treating and managing OCD. OCD comes with a lot of shame and self-criticism. This shame and self-hate (or self-dislike) can often interfere with ERP and therapy, in general. By practicing self-compassion in our OCD treatment, we can work on decreasing rigid and unrealistic expectations we have for ourselves and even our treatment.

Dr. Kristin Neff states that self-compassion has three parts to it: self-kindness, common humanity, and mindfulness

- Self-kindness: Being gentle with oneself and accepting that failure and imperfection are part of life.
- Common humanity: Connecting to others and the common human experience of suffering and pain. You are not alone in your distress, discomfort, or pain.
- Mindfulness: Being present with your emotions and being non-judgmental about your emotional experience

Quick Self-Compassion Practice:

- Permission slips. Create permission slips for yourself to feel emotions, give only 75%, make a mistake, be imperfect, etc.
- Self-compassion statements. Create statements that incorporate all three elements of self-compassion. Jon Hershfield and Shala Nicely created a great format for self-compassion statements in their book, "Everyday Mindfulness for OCD." Using their format, a self-compassion statement could look like:
 - I'm feeling discouraged because I'm experiencing anxiety related to the pandemic. I bet lots of people are feeling anxious and even more anxiety related to the uncertainty of the ongoing pandemic. I'm doing a good job noticing my anxiety without trying to make it go away. I'm going to give myself permission to mindfully notice my anxiety without trying to get rid of it. I'm going to do this for five minutes and then shift my attention to watching an episode of The Office.
- Create space for yourself to feel emotions. Invite them in without judgment. Let them be, without being consumed.
- Ask yourself, if you would say what you're saying to yourself to a friend or even to a family member? How would you treat a friend if they came to you with this problem?

Emily, Stephanie, Scott, Abby, Kasey, Anna, Rachel, Megan, and Travis



Department of Psychiatry

SCHOOL OF MEDICINE

UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

OUR TEAM

Dr. Rachel Davis MD - Medical Director and Psychiatrist

*Emily Hemendinger LCSW, MPH, CPH – Lead OCD
Therapist/Licensed Clinical Social Worker and DBS Coordinator*

Dr. Stephanie Lehto PsyD – OCD Therapist/Licensed Psychologist

Dr. Megan Dery DO – Psychiatrist

*Dr. Abigail Norouzinia PhD – OCD Therapist/Licensed
Clinical Psychologist*

*Kasey Benedict LCSW -OCD Therapist/Licensed Clinical Social
Worker*

*Anna Korbel LSW – Clinical Social Work Faculty
Fellow/OCD Therapist*

*Dr. Scott Cypers – Licensed Psychologist/Therapist
with Johnson Depression Center*

Travis Neace BASW – MSW candidate/OCD intern therapist

GROUP OFFERINGS

Mondays at 12pm

*For students (all ages above 18 years old)
with OCD and related disorders*

Tuesdays at 5pm (waitlist)

*For adults ages 18+ with OCD and related
disorders*

Wednesdays at 5pm (waitlist)

*For adults ages 18+ with OCD and related
disorders*

Thursdays at 4pm (waitlist)

*For adults ages 18+ with OCD and related
disorders*

**NEW* Thursdays at 4pm (biweekly, starting
February 17th - May 26th)*

*OCD Support Group for Parents/Caregivers
(see next page for details)*

Fridays at 4pm (waitlist)

*For adolescents 13-17 years old with OCD
and related disorders*

*We do have a waitlist for individual and
group therapy, however we can definitely
add you to our waitlist and/or send you other
referrals.*

*Are you a clinician who wants to know more
about OCD and ERP? We offer trainings,
consultations, and supervisions!*

[CLICK HERE FOR MORE RESOURCES ON
OCD AND ERP FOR CLINICIANS AND PATIENTS](#)

WELCOME KASEY BENEDICT, LCSW!

We are excited to welcome our newest therapist/team member, Kasey, to our OCD team this year! Kasey is a Licensed Clinical Social Worker and received her Undergraduate degree from the University of Colorado-Boulder. She then went on to earn her graduate degree from the University of Denver. Kasey has experience treating patients with a wide range of clinical presentations and has specialized in the treatment of substance use disorders. She enjoys spending time with her family, hiking, going to yoga classes, and reading.

TALKING TO LOVED ONES ABOUT ANXIETY/OCD

Talking to loved ones about your OCD/anxiety can be very difficult. Will they understand? Will they judge. Will they start to worry about me? Will talking about it with them make the OCD thoughts about them come true? These worries and a host of others are many of the reasons that people with OCD or anxiety choose not to disclose.

When we choose to not share, we continue to give more power to our anxiety/OCD. I talk to folks a lot about this like the Harry Potter Book Series by JK Rowling. You may have heard of it 😊 Many people were so afraid of the evil character, Voldemort, that they chose to reference him as "He Who Must Not Be Named." By doing so, it gave Voldemort even more power and made him even more frightful. There were two people who knew this was the wrong course of action, that by talking about it, it made Voldemort more beatable. This was an important step in the process, to see the Voldemort as a foe that could be beat. The same is true for OCD and anxiety.

Another reason to disclose besides taking the power back from your anxiety / OCD is that in the absence of information about what you are dealing, people are making their own assumptions about your behavior. And, sadly, we have not been trained to be kind in our assumptive processes.

When you disclose, usually that judgement gets filtered through the reality of the situation and the person is more likely to respond with kindness, grace, and understanding. Rather than the negative assumptions that will happen in the absence of disclosure. So, disclosing is really important for a number of reasons.

So, if I have not convinced you, I encourage you to talk with your provider/s about whether disclosure might be beneficial and how it might continue to help you in the battle against your anxiety / OCD.

If you do decide to disclose, here are some important elements you might want to consider sharing and crafting in the disclosure.

1. What Types of Anxiety / OCD Issues with Which You Deal
2. How It Impacts you in the Relationship with whom you are disclosing
3. How they Could Help You In the Battle to Fight
4. What A Supportive Response to Your Disclosure Might Look Like



8-WEEK OCD SUPPORT GROUP FOR PARENTS/CAREGIVERS



Are you a parent of a adolescent or young adult with OCD? Do you want to learn more ways to support your loved one with anxiety/OCD? Join our 8-week support group for parents/caregivers to learn about OCD and how it shows up in the family and learn skills and coaching to help support your loved one's treatment. Cost: \$25 (insurance not accepted).

When: Thursdays at 4pm via Zoom; biweekly starting Feb. 27th-May 26th.

To secure a spot, email Anna Korbelt, LSW at anna.korbelt@cuanschutz.edu or Travis Neace at travis.neace@cuanschutz.edu.

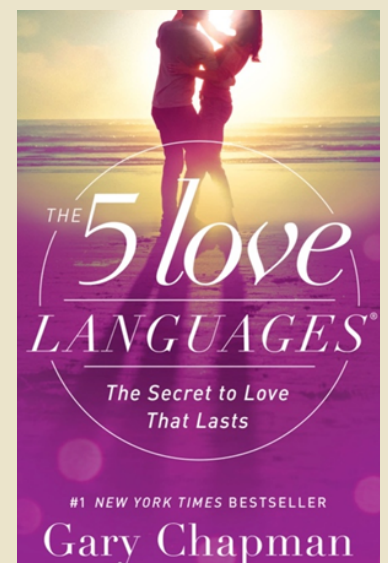
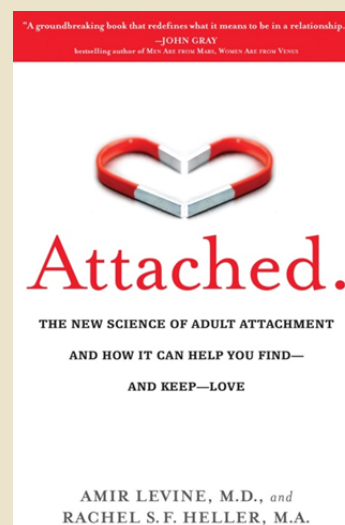
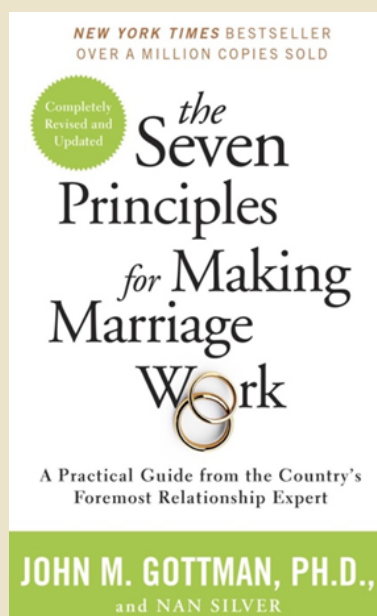
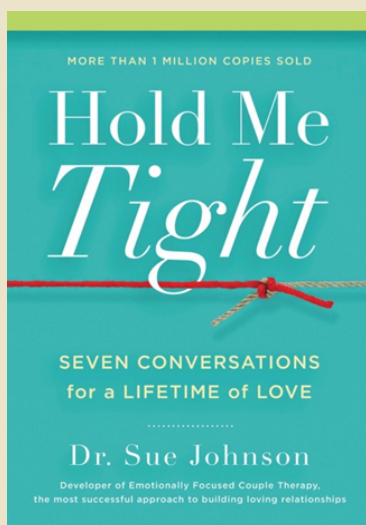
WINTER/SPRING EXPOSURE RECIPE

Practicing Flexibility in Baking:

For this edition of the newsletter, I made *this recipe* without measuring and asked my colleagues to review how they came out. To take it a step further I also: Purchased a chocolate bar that was already broken, used almond extract when I learned mid-baking my vanilla extract was empty, and used no methods of measuring (that includes using measuring cups, spoons, or measuring to make the cookies even!). I did set timers for the baking time. Reviews included a lot of “they’re good.” Some feedback included that the bottoms of the cookies were a bit brown, the almond extract was noticeable, and that they were a little salty. Not too bad for cookies made as an exposure!



BOOK RECOMMENDATIONS TO STRENGTHEN ROMANTIC RELATIONSHIPS



MINDFULNESS MOMENT

Mindfulness is the act of being present in any given moment. OCD likes to take us out of the present moment and have us worrying about the past or future. Mindfulness is a key coping skill to use when managing OCD.

One way to practice mindfulness is by listening to music intentionally and mindfully.

- *Pick a song (classical music tends to be an easy genre to start with)*
- *Play that song and pick one instrument you are going to focus on*
- *Focus only on that instrument. You might be distracted or notice the other instruments, and that's ok. Just remember to bring your intentional focus back to the one instrument*

Example:

- *Song: Danse Macabre*
- *Only going to focus on the string instruments*
- *I listen for the flute. Sometimes it is very loud and the only instrument I can hear. Other times it is very quiet and I need to try really hard to hear it. Some of the time I find myself getting distracted by the other instruments. I remind myself that this is ok, let those instruments be there, and then bring my attention back to the flute*

This is a great example of how we can manage intrusive thoughts that OCD sends our way. While we can't control whether or not the intrusive thoughts are there, we can control where our attention is and how we respond to those intrusive thoughts. When we are going for a walk with our friend, we may be walking along, enjoying nature, but then BAM an intrusive thought pops into our head. At that point, we can choose to be distracted by that intrusive thought, let it ruin the walk, take us out of the present moment, etc. or we can let that thought be there and refocus on the present moment.

Try this activity out with any song. Focus on the lyrics or a musical instrument. Notice the differences in tempo and volume. And remember that you don't have to do this perfectly to be practicing mindfulness!

