
S2C5. The first pillar - CBT

A question that is frequently asked by many who want to understand how recovery in ROCD works is - what is better for recovery; Cognitive Behavioral Therapy (CBT) or Exposure and Response Prevention (ERP)? Or, sometimes these concepts are used interchangeably. Even by doctors. Many professionals recommend CBT for the treatment of OCD, sufferers go to CBT specialists and come back disappointed and with a firm belief that CBT does not work. Hence, a word of clarification is required. ERP is one of the several types of CBT and is considered to be the gold standard in treatment of all types of OCD (including ROCD; McKay et al., 2015).

So, CBT is an umbrella term, and ERP is a specific branch under this umbrella. As an analogy, CBT is like engineering and ERP is like computer engineering. Just as all computer engineering is engineering but all engineering is not computer engineering, all ERP is CBT, but all CBT is not ERP. In this chapter we shall understand what CBT is.

CBT: CBT has two components to it - *Cognitive* and *Behavioral*. *Cognitive* comes from cognition which refers to thinking. In the *cognitive* part of CBT, the attempt is to change the thinking pattern of the person. The objective is to understand the way the person thinks and identify cognitive distortions (that is thinking errors) to correct faulty thinking (Kuru et al., 2017). For example, if you think that your partner should have all the perfect attributes and no imperfections at all to be worthy of being in a relationship with you, or else the relationship is not ideal, you are a victim of a cognitive distortion referred to as ‘All or Nothing’ or ‘Black or White’ thinking. According to the ‘All or Nothing’ cognitive distortion, your mind tells you that if you do not have everything you want, you cannot be happy.

Through the *cognitive* part of CBT, you are made to understand the irrationality of the thought. Similarly, if your mind tells you that just because your partner has not texted you the way you wanted her to, she is having an affair, it is a cognitive distortion referred to as ‘Jumping to Conclusions’. Once you understand the irrationality of your thinking, you can then work towards not falling prey to the cognitive distortions. The *cognitive* part of CBT thus works to realign incorrect thinking.

The *behavioral* part of CBT works towards getting you to change your behavior through a process called cognitive restructuring. For cognitive restructuring, you would need to observe your intrusive and other negative thoughts and map them to the cognitive distortions you identify in each case. Once that is done, you would need to provide an alternate response that is healthier and more adaptive. The next step is to put the restructured cognition into action through implementation.

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For example, for the ‘All or Nothing’ thinking example above, if you restructure your cognition by understanding that it is fine for your partner to not have all perfect attributes, the behavioral change you bring about is accepting the imperfections in your partner. Or in the ‘Jumping to Conclusions’ example above, if you restructure your cognition by realizing that your jumping to conclusions is erroneous, you may be able to stop yourself behaviorally from confronting your partner about the ostensible affair that she might be having.

If CBT is not administered and the understanding of the irrationality of the thought is not provided, modifying behavior is possible but the effort may seem unreasonable and hence difficult.

The entire next chapter focuses on these cognitive distortions. Read through them many times and absorb the information well. Try to map your obsessions and other thoughts to the cognitive distortions to understand their irrationality. The more aware you are, the better you will get at handling your irrational thoughts. Your grasp of them should be strong enough for you to be able to explain them to a small child, if needed.