
S4C9. Compulsions in ROCD

Let us now see what kind of compulsions there could be in ROCD and how to identify your compulsions. Compulsions are actions (either physical or mental) that you may engage in to deal with the distress caused by the obsessions (Goodman et al., 2014). Compulsions can be recognized by the urgency with which you want to do them. A thought causes distress and the mind urges you to take some immediate action, either physical or mental. That action may be the compulsion. Let us look at some of the common compulsions that have been observed in people with ROCD.

Monitoring your own feelings and sensations: You may find yourself monitoring what you feel in the presence of your partner (e.g., Am I attracted to my partner? Am I aroused by my partner's body? Am I aroused by someone else?). You may also monitor if you feel 'enough' of a feeling around your partner (e.g., I feel sexually attracted to my partner but is the attraction strong enough?)

Researching and checking: You may start looking for information about relationships by reading articles, books, watching videos and generally excessively researching on the internet (e.g., 'What do good relationships feel like?' 'What are the qualities of a good partner?'). You may keep testing your feelings or your partner's behavior in various situations (e.g., 'Does my partner make me laugh?' 'Does my partner interact well with others?').

Comparison: You may begin to compare your partner with other people to see if your partner has the qualities you like in the other person. Or, the comparison may be to see if the feelings towards the current partner match or surpass what you felt with past partners or other potential partners (e.g., colleagues, partners of her friends, acquaintances or an internal image of an ideal partner). Or you may look at other couples and see how they are with each other with a view to comparing how your partner is with you.

Reassurance seeking: You may begin to seek reassurance about the correctness of the relationship. You may keep asking your friends whether they feel the same about their partners or not. You may consult with your family about whether or not they think you are in the right relationship. Or, you may consult astrologers, or fortune tellers to predict whether the relationship will last. All these are reassurances.

Neutralizing thoughts: You may try to neutralize a bad thought by replacing it with a good thought. If your mind says you want to dump your partner, you may neutralize the thought by saying '*I would never do it to her*'. When your mind says you may not love your partner enough if you have to be attracted to other people, you may try to neutralize the thought by saying '*No it's not true; I do love my partner*'. You may even try to recall earlier times when you felt and expressed your love for your partner.

Post-facto rumination: You may go over memories of some past events or situations to try and figure out the correctness of something in relation to the partner or the relationship. You may wonder whether your partner sounded smart enough, looked good enough with you, seemed to blend in or not and so on. Not finding the right or convincing answer may cause you anxiety and lead you to ruminate more.

Attempt to change your partner: You may attempt to change your partner's qualities, styles, or looks or have her do things just the way you want. It may be done angrily, almost as if to put the partner down about how she does not measure up. It is like trying to put your partner 'just right', trying to make her perfect so that she lives up to your standards of acceptability, regardless of whether you live up to hers or not.

Avoidance: Avoiding social situations (e.g., meeting with certain friends) or particular leisure activities (e.g., going to romantic movies, watching romantic comedies on television), or even fighting with the partner to avoid closeness are all examples of this compulsion. You may think that it is better to avoid the situation altogether than to get triggered and then end up doing compulsions. But avoidance of the situation is a compulsion in itself.

Proxy-compulsion: When you get someone else to do something for you because it would cause you anxiety if you had to do it yourself, it is a proxy-compulsion. This is another form of avoidance, where you would like to get something done but don't want to do it yourself, just so that you can avoid the trigger and not risk becoming anxious.

Negative self-talk (NST): You may end up engaging in self-criticism or degrading self-talk (e.g., *'I am selfish'*, *'I am unappreciative'*, and *'I am stupid for thinking like this'*). You may even begin to believe that you are not good at anything anymore (even things not related to your ROCD). Or, you may have sexual thoughts about other people and brand yourself a cheater (leading to another compulsion of confession).

Distraction: You may try to push intrusive thoughts away from your mind by trying to distract yourself. You may either try to think of a happy memory or you may put on loud music to drown the thoughts or you may engage in praying or talking to a friend to make the thoughts go away. You may have heard or read that one must not engage with one's intrusive thoughts and you may choose to distract yourself because staying with the thoughts may cause you significant discomfort.

Confession: You may develop a distorted view of what is allowed and what is not allowed in the relationship and think that everything you do may be amounting to being disloyal to your partner. This may cause you to confess your thoughts to your partner. For example, if you like how an office colleague smiles at you or jokes about, you may think you are more attracted to her than to your partner, leading you to confess to your partner about your 'feelings'.

Stalking social media: You may want to check if your partner is loyal to you

and may end up stalking her on her social media accounts. You may want to check if she looks happier without you than with you. Or you may want to check if she is with someone else and probably cheating on you.

Lashing out at the partner: You may think that your partner is cheating on you. Or you may think that she is not spending enough time with you. Or you may think that she is not loving enough or not trying hard enough. All these and other thoughts may make you want to lash out at your partner despite knowing that it would probably not go well with her.

Apologizing excessively: This compulsion is common to a lot of OCD presentations (including ROCD), but it does not affect everybody. You may think you have wronged others and end up apologizing for the smallest of things. Often, they are not even what others would consider mistakes, but you do. Sometimes it may annoy the other person for the number of times you apologize, and the other person may snap at you, which may make you apologize more.

Pre-planning: Pre-planning your course of action before entering a trigger in order to minimize your anxiety is a compulsion. When you are aware that you are in a situation where you are likely to get triggered, you may automatically end up planning how to minimize your anxiety if you are triggered. For example, if you decide to watch the rerun of a romantic movie with your girlfriend, you may plan to get up and go for popcorn when you know scenes that might trigger you more are likely to play.

Monitoring your partner's feelings and behavior: On the one hand, you may fear that you may be with the wrong person. On the other, the thought of leaving her for her imperfections may make you anxious. This may begin to show on your face and may give rise to another compulsion - to monitor your partner's feelings, expressions and behavior when you are triggered and want to conceal your anxiety. This is to make sure that despite you being triggered your partner does not show any indications of wanting to quit the relationship.

There may be other compulsions that you may be engaging in that may not have been covered here. Since OCD is a nuanced disorder, both obsessions and compulsions can morph from text-book presentations to something completely unique for you. If you have any compulsions that are not covered here, make a note of them. You will find the list of compulsions as identified in the Y-BOCS (Goodman et al., 1989a, b) as Additional Resource 6. Go through them and make a note of everything you go through in your daily life.

Using the previous worksheets (2, 3, 4, 5, 10 and 11), write down your compulsions in Worksheet 12. First, write down the name of your ROCD (such as Kay) in the space provided. Next make a list of all your compulsions from the Y-BOCS checklist.

Next, observe your behavior and identify what your ROCD compulsions are.

THE RECOVERY PROCESS

Then convert your compulsions into statements beginning with 'Kay is telling me to' or 'Kay is asking me to'. Complete this exercise before moving to the next chapter.

In the next chapter we shall look at understanding our compulsions from the lens of mindfulness and acceptance, using the compulsion matrix.

To-Do:

Refer to AR6 - the Y-BOCS symptom list - compulsions

Complete WS12 - compulsions