

OCD Newsleffer Winter 2020

Volume 34 | Number 4

A Note from Dr. Liz McIngvale, Founder of the Peace of Mind Foundation



Dear OCD community,

My passion for advocacy began 15 years ago, after I received appropriate treatment for my OCD. Finally, I knew what everyone with OCD should know: that OCD is a tough condition but, despite our diagnosis, we can live the meaningful life that we deserve.

IN THIS ISSUE

FROM THE FOUNDATION

| President's Letter 3 | , |
|---------------------------------|---|
| A Note from Dr. Liz McIngvale 4 | ł |
| 2021 Event Calendar 5 | , |
| Advocacy Corner 6 | ; |
| OCD Awareness Week | |
| 2020 Recap7 | ' |
| Draw Your Monster Gallery 14 | ŀ |

FROM THE FRONT LINES

Persistent Unwanted Thoughts Coupled with Mood Lows and Highs: A Personal Journey through OCD and Bipolar Disorder by Anonymous...... 8

THERAPY COMMUNITY

A Big Bang Theory of OCD: Why the First Few Moments Make All the Difference in the World by David J. Keuler, PhD 10 Institutional Member Updates ... 12

RESEARCH NEWS

2021 Research Grant Program Call for Proposals..... 21

Extending the Reach of Hoarding Research: Collaborating in Order to Connect with and Better Understand More Complicated Cases of Hoarding by Peter Lenkic, MA, Maria Bleier, BS, Patricia Jiang, BFA, Christina Bratiotis, PhD & Sheila Woody, PhD 22

Research Participants Sought 24

FROM THE AFFILIATES

The **OCD Newsletter** is published by the International OCD Foundation, Inc.

President, IOCDF Board of Directors: Susan Boaz

Chair, IOCDF Scientific & Clinical Advisory Board: Michael Jenike, MD

Newsletter Editor-in-Chief: Jeff Szymanski, PhD

Newsletter Managing Editor: Jessica Price, MA

Copy Editor: Tiia Groden, MA

Layout Design: Fran Harrington

The mission of the International OCD Foundation is to help those affected by obsessive compulsive disorder (OCD) and related disorders to live full and productive lives. Our aim is to increase access to effective treatment through research and training, foster a hopeful and supportive community for those affected by OCD and the professionals who treat them, and fight stigma surrounding mental health issues.

CONTACT THE IOCDF:

Phone: (617) 973-5801 Email: info@iocdf.org Website: iocdf.org Facebook.com/IOCDF Twitter: @IOCDF Instagram: @IOCDF YouTube.com/IOCDF

Mailing Address:

International OCD Foundation P.O. Box 961029 Boston, MA 02196

DISCLAIMER: The IOCDF does not endorse any of the medications, treatments, or products reported in this newsletter. This information is intended only to keep you informed. We strongly advise that you check any medications, products or treatments mentioned with a licensed treatment provider.

Copyright 2020 by the International OCD Foundation, Inc.

Comic Corner

Something Dangerous

by Clara Klugmann

Follow her on Instagram: @clara_leo_k





The International OCD Foundation's strong financial health and commitment to accountability and transparency have earned us a **4-star rating** from Charity Navigator, America's largest independent charity evaluator.

This is the first time that the IOCDF has earned this top distinction.

Support the IOCDF with a year-end contribution today.



President's Letter

by Susan Boaz

Dear IOCDF Friends and Family,

Every time I sit down to write a newsletter, I struggle at first to think of a topic. Our community includes family members, patients, treatment providers, and researchers. You may be reading this as someone

who is just learning about OCD, and feeling the relief of finally understanding that you are not alone. You may be the mother of a young child who is newly diagnosed, or the brother of someone whose OCD is impacting their family and work. You may be a researcher with a novel idea that needs to be funded or a therapist with a challenging patient looking for new ways to try to help them. So, whom shall we speak to today? What topic will resonate; what is the most important thing to talk about right now?

What keeps running across my mind is a deep gratitude. That's a little odd to say in 2020, I know! Most of us are ready for this year to end — every other post that I see on social media seems to be wishing it were 2021. It would be disingenuous not to acknowledge that as we enter November, the tensions of a global pandemic continue to affect nearly every aspect of life. There is no way to ignore the impact this has had on so many of our families, whether on health, finances, home schooling, or simply changes to normal routines. This pandemic is a commonality that runs across all the diverse groups that make up the OCD and related disorders community.

Even with this reality, gratitude is what is driving me today. Six months ago, our leadership was worried about how to continue training therapists, how to raise awareness through our annual 1 Million Steps 4 OCD Walk, and how to provide all the content that our Annual OCD Conference typically provides. We were worried about how to stay connected to the organizations who support us, to the families, to those who suffer from OCD. We were worried about the risk of important initiatives grinding to a halt.

As we look back, instead of these worries coming true, we find that we are an even stronger community. We have found new ways of reaching out to each other, and new ways of meeting. Instead of our initiatives stalling, they are invigorated by the energy of new participants. I am so grateful for the way this community has come together this year to support each other, and to refuse to allow this pandemic to slow our progress. What is truly exciting to me is not that these new ways of working have replaced the old, but instead that we now can see a different path forward that combines the lessons of 2020 with what has worked in the past. We anticipate multiple conferences in the future — both in person and online. We know now that we can effectively reach people who cannot currently travel, and that our international community is vibrant and ready to participate virtually. In the last newsletter, I shared my gratitude list for the day. Today, I'd like to share a part of the IOCDF's gratitude list. This doesn't begin to honor all those who are impacting us, but it's a start at saying thank you.

The IOCDF Scientific and Clinical Advisory Board, who is so generous with their time that it's astonishing. They care deeply about everyone who suffers from OCD. When we needed panelists for our Virtual Town Halls, they stepped up. When we had to plan 4 new virtual conferences from the ground up, they offered to participate without hesitation.

People who are developing new organizations like Not Alone Notes, HardQuirk, and Riley's Wish, who continue to generate an engaged community of advocates.

Our Research Grant Award winners, who are taking the lead in investigating issues like early intervention strategies, the role of neuroinflammation in OCD, identifying biomarkers, better understanding how OCD affects older adults, and innovations in the treatment of hoarding disorders. Along with our matching donor for our Research Grant program.

And finally, to Dr. Elizabeth McIngvale, who has asked the IOCDF to take over and incorporate Peace of Mind, a non-profit she founded to help the OCD community 15 years ago, so that we can reach and support more individuals diagnosed with OCD (you can read more about this on page 4).

With mixed emotions, we have a dear friend who is rotating off the Board of Directors this year, Denis Asselin. Denis has been a driving force in deepening our understanding of the personal cost and complexity for families of those who suffer from body dysmorphic disorder (BDD). His son, Nathaniel continues to be honored each year in our 1 Million Steps 4 OCD Walk, and reminds us daily of why we do this work.

I'm also excited to announce a new member of our board of directors, Jenny Yip. Jenny is the founder of the Renewed Freedom Center, where she has pioneered diversity initiatives and has trained multiple young trainees; she has been the chair the IOCDF Diversity Council for the last 2 years and is a regular contributor at our Annual OCD Conference on multiple topics; and most recently has helped us form the Perinatal OCD Task Force. Most importantly, Jenny combines an indepth therapeutic knowledge about the OCD community with a passion to provide greater access to care to everyone who suffers from OCD.

Stay safe this winter, and take care of yourselves. Breathe deeply and gather your support system around you. Be gentle with one another. A new year is coming for all of us, and I look forward to celebrating and sharing it with each of you. And know that you belong to this community. We are grateful you are here.

With love,

Susan M

Susan Boaz IOCDF Board President and mom to a fabulous teen ①

FROM THE FOUNDATION

A Note from Dr. Liz McIngvale, Founder of the Peace of Mind Foundation

(continued from front page)

At that point, I felt compelled to give back and fight for those who had little to no access to treatment. My first experience sharing my story was at the Annual OCD Conference after being encouraged to give a talk. This was the first time that I got a glimpse into how I can turn my pain into purpose. I knew from that point on that I wanted to share my story and encourage others to not allow OCD to define them. As I embarked on my advocacy journey, I started speaking out publicly about my struggles and I was invited to become the first national spokesperson for the International OCD Foundation (IOCDF). Through the marketing campaign led by the IOCDF, we began to break down many barriers to treatment and start our work of de-stigmatizing OCD.

My passion for serving others grew stronger, which lead me to establish the Peace of Mind Foundation. My goal for the foundation was to provide resources and support to those impacted by OCD. We started by offering treatment scholarships for individuals who were unable to afford or access treatment. While this was meaningful, we were only able to help a handful of people each year. We began to shift our focus from supporting individual care to providing resources to a broader population. From a local support group to providing resources across the globe, we learned that helpful content and connecting with others were critical pieces of the work that we did. We learned how helpful effective OCD content was to so many and started focusing on highly accessible content available for all with OCD. From hosting webinars to establishing OCD Challenge, we wanted to offer no-cost resources available to all.

As the foundation continued to evolve, we always worked alongside the IOCDF to offer complementary programs. Peace of Mind became a strategic partner that helped offer scholarships to the Annual OCD Conference and supported community clinicians to attend the BTTI trainings. As the IOCDF began to offer more content and events online, we worked in collaboration and co-branded many of our online efforts together. As our partnership grew, we continued to seek ways to make our alliance stronger in order to serve more people impacted by OCD.

Today, I am excited, honored, and humbled to announce that the Peace of Mind Foundation is now officially a part of the International OCD Foundation. I know that we have made a difference in the lives of those living with OCD in the past 15 years. By joining the IOCDF, we are expanding opportunities and increasing our opportunity to make an even greater impact on those who need it. I could not be more excited to bring our content and community piece to the IOCDF, where the Peace of Mind Foundation brand will live within the IOCDF.

With this change, the IOCDF is restructuring the ambassador program and I will now serve as a National Advocate alongside Ethan Smith. I am thrilled to be back with the IOCDF in this new role, as well as carrying out my duties as a director on the board.

Overall, the Peace of Mind Foundation and the International OCD Foundation have always had common goals. The core of our work has been to help those suffering from OCD get better access to treatment, resources, and to decrease stigma. As a member of this community for many years, this acquisition is an exciting new chapter for me and the foundation as a whole.

Most importantly, I know that combining forces will allow us to better serve all of you, and for that I am forever grateful.

Always,

Dr. Liz McIngvale 🔍



Check out the IOCDF Peace of Mind Virtual Community at *iocdf.org/peaceofmind*! This new resource shows

you some of the many ways you can be an active member of the OCD and related disorders community online. Head there for information about our live streams, online forums, and more!

FROM THE FOUNDATION

Announcing the 2021 IOCDF Events Calendar!

While the COVID-19 pandemic prevented us from meeting in person for the 2020 Annual OCD Conference, it also provided us with the opportunity to expand our conference programming into the virtual sphere.

Now, we are thrilled to offer a variety of events to encourage accessibility both in person and virtually. We are encouraging the global network of providers, educators, and people with lived experience to join us in community, collaboration, and education. Mark your calendars, and stay tuned for more information! Please note dates are subject to change depending on WHO regulations. Please note: There will be no proposal submissions for the 2021 Online OCD Camp for Kids & Families, Annual OCD Conference, or Annual Hoarding Meeting. Instead, the agenda will be created from the acceptances for the 2020 Seattle conference. We are accepting submissions for the Annual Research Symposium and for all virtual events. Proposal submissions for these events will open Monday Jan 4, 2021 and close February 1, 2021. Submit a proposal for virtual events at *iocdf.org/conference*. Submit a proposal for the research symposium at *ocdresearch.org/symposium*.

We are thrilled to bring these exciting events to you. Stay tuned for more information (sign up for email updates at *iocdf.org/sign-up*), and we look forward to seeing you soon!

IN-PERSON EVENTS

| 27th Annual OCD Conference, New York, NY | . July 9 –11, 2021 |
|--|--------------------|
| Annual Research Symposium (Live/Online Hybrid Event) | |
| Annual Hoarding Meeting | July 9 –10, 2021 |

VIRTUAL MEETINGS

| Online OCD Camp for Kids & Families | January 30–31, 2021 |
|---|-----------------------|
| Online Hoarding Conference | August 7–8, 2021 |
| Conferencia de TOC Online (Spanish language conference) | September 11–12, 2021 |
| Online OCD Conference | October 9–10, 2021 |

NEW! OCD in Diverse Populations Resource Center

OCD affects all races and ethnic groups. But, it can look different from one group to the next. The Resource Center at **iocdf.org/ocd-bipoc** is intended to provide education, awareness, and resources for OCD and related disorders in Black, Indigenous, and People of Color (BIPOC).

In the Resource Center, you'll find content about what OCD looks like in a variety of racial/ethnic groups, along with information for clinicians working with diverse populations. The Resource Center also contains a list of all BIPOC providers, pulled out from the IOCDF's Resource Directory.

Check it out iocdf.org/ocd-bipoc today!



ADVOCACY CORNER

Advocacy Corner



This fall was an exciting time for the IOCDF's Public Policy Advocacy Program! Although we were unable to meet in Washington, DC for the annual Capital Walk, we hosted our first-ever "Hill Day" event on October 12th and 13th.

Virtual Voices for Mental Health: An Online Day of Action was a virtual event that brought together over 100 advocates from the OCD and related disorders community. Participants were invited to attend a rally and training, and then took part in an email campaign where they urged members of Congress to pass critical mental health legislation. Participants advocated for bills that would:

- Expand access to teletherapy and address disparities
- Create parity in insurance coverage for mental health services, regardless of whether they are delivered via telehealth or in person
- Permanently extend the COVID-19-related expansions of telehealth by the Indian Health Service and Medicare
- Establish a loan repayment program for mental health clinicians who practice in areas with critical shortages of mental health clinicians
- Expand Medicare's mental health coverage to include mental health counselors, professional counselors, and marriage and family therapists

The advocates who took part in the Day of Action represented 28 states, and sent over 300 messages to 114 members of Congress! We are incredibly grateful to those who took time to participate, raise the profile of important legislation, and make their voices and personal stories heard. If you would like to learn more about this event, or sign up to hear about future advocacy events, please visit *iocdf.org/advocacy*.

OTHER ADVOCACY NEWS AND UPDATES:

- The National Suicide Hotline Designation Act of 2020 was passed by Congress and signed into law by President Trump in October. This law establishes 988 as the universal telephone number for the National Suicide Prevention Lifeline. This step builds upon action taken by the Federal Communications Commission (FCC) earlier this year. The IOCDF was among a group of mental health organizations urging the FCC and Congress to make this change. The new number is expected to go into operation in 2022, and until then, 1 (800) 273-TALK remains the telephone number for the suicide lifeline.
- The IOCDF expressed support for H.R. 4996, the Helping MOMS Act of 2020, to members of leadership in the U.S. Senate. This bill was recently passed by the U.S. House of Representatives, and would help states expand their Medicaid coverage for postpartum care to 12 months after delivery (currently this coverage only extends 60 days after delivery). If passed by the Senate and signed into law, this bill would increase access to postpartum mental health care, including treatment for postpartum OCD, for millions of new mothers nationwide.

To get up-to-date information about the latest IOCDF Public Policy Advocacy program activities, please visit **iocdf.org/advocacy**.

FROM THE FOUNDATION

2020 OCD Awareness Week: THANK YOU for Participating!



This year's OCD Awareness Week was a great success! We hosted a full week of virtual events, as well as a week-long social campaign, to help raise awareness and build community. Thank you to all who participated! If you missed any events, all were recorded and are available to view at **YouTube.com/iocdf** and **Facebook.com/iocdf**.

VIRTUAL 1 MILLION STEPS 4 OCD WALK

The week kicked off with the first-ever Virtual 1 Million Steps 4 OCD Walk. We had nearly 2,000 walkers join us from 46 states and 14 countries to raise awareness

in their communities. Plus, we raised nearly \$200,000 toward programming that supports everyone affected by OCD and related disorders. Thank you to all of our walkers, to IOCDF National Ambassador Ethan Smith and OCD advocate Marc Summers for launching the event, and to our national sponsor Rogers Behavioral Health!

DRAW YOUR MONSTER

We launched this year's #OCDWeek social engagement campaign in partnership with Draw Your Monster. In a live stream, Ethan Smith and Sean Shinnock, founder of Draw Your Monster, discussed



1 Million

OCD Walk

Steps 4

strategies for drawing your anxiety and why it's therapeutic. Then, the audience helped Sean create a community monster. Check out the centerfold for #DrawYourMonster entries!

JUST, ETHAN/LIVE WITH LIZ CROSSOVER

Dr. Liz and Ethan hosted a joint stream to discuss the merger and to announce our new virtual programming schedule. Each week, Ethan and Dr. Liz will each host a live stream,



so on most weeks we will have two virtual events hosted on Facebook and YouTube. Check out our events calendar for details at *iocdf.org/calendar*.

IOCDF TRIVIA/OCD SHORT FILM FESTIVAL

We held a special edition of IOCDF Trivia, followed by an OCD short film festival! The festival concluded with a Q&A with the directors of the five short films. IOCDF Trivia



is held once a month, and short film festivals will happen periodically throughout the year.

OTHER EVENTS

We hosted our two-day advocacy event, Virtual Voices for Mental Health: An Online Day of Action. Learn more about this event in the Advocacy Corner section on the previous. On Wednesday, Dr. Liz McIngvale of the Peace of Mind Foundation held a live stream with IOCDF Executive Director Jeff Szymanski to announce the acquisition of Peace of Mind by the IOCDF. Learn more about the merger on page 4.

Thank you again to our community for coming together, fighting stigma, and making everyone feel less alone during this difficult time. Together, we can make a difference!

FROM THE FRONT LINES

Persistent Unwanted Thoughts Coupled with Mood Lows and Highs: A Personal Journey through OCD and Bipolar Disorder

by Anonymous



It was the beginning of the end. At least it felt this way when I was 10 years old, struggling with relentless satanic imagery. Unbeknownst to me, this was the first of many manifestations of a life-long struggle and management of obsessive compulsive disorder. Had I known that what I was experiencing at the time was not unique to my experience, I may not have felt so ashamed, hopeless, guilt-ridden, and frightened. Eventually, as a young adolescent, I discovered what I was experiencing to be OCD, through an internet search.

Despite this discovery, I had no intervention, treatment, or solace. At this young age, my mom took me to my pediatrician, to whom I detailed the essence of my OCD, likely ashamed and fearful to be brutally honest. He simply said an SSRI wouldn't be advisable. A visit with a local priest entailed a conversation of what I had been experiencing, and in the presence of my mom, he said, "As long as you don't accept the devil, God knows what's in your heart." This didn't offer me any relief or catharsis from my shame. Living in a house adorned with Catholic figurines and attending a Catholic grade school also did not ease the internal agony I experienced, and which I managed to keep to myself due to the fear of others' responses.

My OCD continued to wax and wane and change in its symptom presentation throughout my adolescence. It may be easier to list the OCD types I didn't experience than those I did. Throughout my development, I experienced symptoms related to various intrusive thoughts, symmetry, perfectionism, homosexual OCD, checking behaviors, repetitive prayers and mental phrases, scrupulosity, and others. Looking back now, I'm amazed that I managed to appear "normal" throughout my classes, adolescent activities, sports, and interpersonal interactions. The dissonance of what I felt internally combined with knowing that others were completely unaware was only exacerbated through other traumatic events across my early development, including years of violent bullying at school. Even in my home, living as an only child, there was no true solace or someone from whom I could seek support. Instead, there was a dysfunctional home environment with much fighting and screaming; another place where I didn't truly feel at ease. I felt frozen with increasing shame and self-hatred.

Moving forward to high school, I made close friends and excelled academically. Many of the people who were my bullies in grade school also attended this school, though I managed to fit in with others, overcompensating for my insecurities by excelling with my guitar playing and academics. At this time, I also became acquainted with smoking marijuana, a substance that for the first time appeared to provide me the perceived relief I never had, temporarily freeing me from my OCD, social anxiety, and chronic state of hyper-awareness to threats in my environment. Also around this time was when my OCD morphed into sensorimotor OCD, where I was hyper-aware of my blinking and other typically automatic physiological functions. With this new presentation came an unrelenting hyper-awareness of my thoughts. This meta-consciousness, where I would be aware that I was thinking about thinking about thinking, etc., was and remains the most insidious and distressing form of my OCD.

FROM THE FRONT LINES

connected me with lead psychologist Dr. Anthony Pinto.

received treatment for my OCD, it became clear that my

meta-awareness OCD would not respond to a traditional

we have maintained a comprehensive treatment plan

exposure and response prevention format. Collaboratively,

In working with Dr. Pinto at age 25, the first time I ever

Persistent Unwanted Thoughts Coupled with Mood Lows and Highs (continued)

As I continued to self-medicate with marijuana, I quickly began experiencing increased anxiety, which later developed into an elated mood which I had never experienced. Shortly after, I found myself at 16 years old hospitalized at an inpatient psychiatric setting where I would stay for about a month and be diagnosed with bipolar I. This was my firstever form of psychological/psychiatric intervention, during which I experienced euphoria, pressured speech, flight of

which I experienced ideas, grandiosity, agitation, and a reduced need for sleep. My mania wasn't fixed by numerous cocktails of medication, leading me to ultimately have it mitigated through ECT. It was during

⁶⁶ Looking back now, I'm amazed that I managed to appear 'normal' throughout my classes, adolescent activities, sports, and interpersonal interactions. ⁹⁹

involving traditional exposures, nonjudgmental acceptance of my "noisy" brain, self-compassion, time management, and a focus on maintaining structure and regular self-care, allowing me to manage my OCD and bipolar disorder while keeping all my life responsibilities

in balance. As a

this time that my parents first attended to my mental health, and while it was much later than called for, I am grateful for their support. Returning to school was another challenge where I feared further social persecution.

I would go on to repeat this process of mania and hospitalization two more times before establishing my current streak of six years of euthymia, in other words not having mania or severe depression. I continued my undergraduate studies while excelling and making profound life-lasting relationships that have led me to a positive progression. While I continue to maintain a healthy lifestyle in order to stay in remission from mania, my OCD persists. My hyper-awareness OCD interferes at times with my ability to be present and fully engaged in the areas of my life I value. Despite this, I've made extraordinary improvements, developing the insight and mental flexibility to continue living a values-based life despite the long-lasting impacts of my childhood.

I was fortunate to receive specialized care for my bipolar I, including medication management and psychotherapy, at the Northwell Health Bipolar Center, located at Zucker Hillside Hospital. Conventional pharmaceutical approaches to OCD are complicated when one has comorbid bipolar disorder because of the risk of SSRIs inducing mania. This has required special attention. I appreciate the expertise of psychiatrist Dr. Raphael Braga who has diligently monitored my case and adjusted my psychiatric medications when necessary. As luck would have it, Northwell Health also has a specialty clinic in OCD at Zucker Hillside. Dr. Braga current PhD student of clinical psychology, I am grateful for our work together for its personal impact as well as for what I have learned and now am able to apply to my own work with clients.

Living with either OCD or bipolar I alone, nevertheless together, complemented with a history of trauma, is a battle for anyone. I represent the potential of one to not only manage the symptoms from this amalgam but to also thrive and lead a fulfilling life. I recognize that my future will not be linear, and setbacks are inevitable. However, my personal journey, along with the expert assistance of my providers at Northwell Health, continues to inspire me and instill hope and curiosity for my future and in my ability to pay these insights forward to anyone who steps in my office to seek my care as a psychologist. In my work with Dr. Pinto, I have become passionate about the cognitive and behavioral steps one can take to not only manage comorbid OCD and bipolar disorder but also to transform what can otherwise be an agonizing reality into a state of flourishing and fulfillment. The afflictions of my past continue to have their impact on me; however, without them I may not have cultivated compassion towards others' suffering nor realized the common humanity among us all. Through these experiences, I've found my road to redemption as well as my calling and purpose in life. \bigcirc

A Big Bang Theory of OCD: Why the First Few Moments Make All the Difference in the World by David J. Keuler, PhD



For millennia, human beings have glanced up at the stars and wondered how it all came to be. Today, cosmologists attempt to understand what they see by reverse engineering the timeline of the universe. That is, they work backwards to deduce the first few seconds of its existence. Understand how it all begins, and you understand why it's currently doing what it's doing.

The OCD "universe" can be understood similarly. Obsessions swirl around your mind while black holes of anxiety and physical discomfort draw in neighboring thoughts, emotions, and distressing images. As this happens, behaviors are born. As they mature, these behaviors exert an increasing influence on the thoughts, emotions, and physical sensations that give rise to them. What begins as a small hot spot of discomfort expands into a complex galaxy of obsessions and compulsions. Understand how OCD begins, and you better understand why it's doing what it's doing (and ultimately, how it will all come to an end).

So what can we imagine happened at the beginning of the OCD universe, in those crucial moments when OCD first made its appearance? Some answers can be found in the histories of individuals with OCD. Many recall a time in their life prior to OCD's arrival, a time when they were fine — until they were not. As one individual with OCD recounted,

"I was doing well at age eight or nine until I saw a knife in the kitchen and wondered what prevented me from using it in a violent way." In this example, the perception of the knife was quickly followed by a distressing thought. This sequence represents moments one and two on our universe timeline.

In a matter of seconds, his OCD universe expanded rapidly. "I was so horrified. I fled to my room and tried my best not to think about the knives. I simply couldn't do it despite my best efforts." Here, anxiety in response to a distressing thought led to the fighting, fleeing, and freezing responses that would eventually define his compulsions.

If you haven't noticed, such "survival responses" are all behaviors, and this fact is critically important: We are biologically programmed to act in the presence of a threat. Undoubtedly, we have evolution to thank for this. We perceive a threat and then experience nervous system activation. This activation takes the form of anxiety (or in some cases, physical or psychological discomfort). Once triggered, this activation is followed by an urge to do something in order to escape a perceived threat and increase our chances of survival. The sequence ends when we engage in that final "doing."

The origin of the OCD universe is now revealing itself. OCD begins as an experience of uncomfortable thoughts, emotions, or physical sensations. These experiences are then labeled as unwanted and threatening. Once labeled as

A Big Bang Theory of OCD (continued)

such, the experience triggers fight-flight-freeze responses. Behavioral responses that succeed in reducing the threat are stored in our brains as adaptive responses. When next in the presence of this threat, we feel compelled to engage in these very same responses. They become "what we do" in this particular situation. This "doing" is of course adaptive when our fears are rational. However, when our fears are irrational (as is the case in OCD), this "doing" becomes compulsive and exerts a gravitational pull on the uncomfortable experiences that gave rise to them. Thus they all hold together in this manner. The physics of the OCD universe are now becoming clear.

Let's extend our metaphor and consider the idea of a multiverse, or multiple universes. Epidemiological studies inform us that approximately two percent of individuals occupy the OCD universe. The other 98%, however, live in the conventional universe — one that looks and feels very different from the OCD universe. That two universes even exist raises a number of intriguing questions: Why does this happen, given that individuals with and without OCD report the same types of intrusive experiences over the course of their lifetimes? Do the very first few seconds of each universe matter? And if so, how do these moments determine who will ultimately occupy which universe?

As we examine our conventional universe, we can make one immediate assertion: unwanted experiences in the conventional universe do not give rise to the rapid expansion seen in the OCD universe. In the conventional universe, intrusive thoughts, emotions, and physical sensations roam freely and do not remain in orbit around each another. The difference seems to be tied to the behaviors that are born in response to upsetting experiences: In the conventional universe, they are conspicuously absent. It would seem then that the OCD universe requires the gravitational pull of survival responses in the absence of true danger. Without them, upsetting experiences drift away, and the conventional universe unfolds.

Upon further examination, we see that upsetting experiences in the conventional universe are permitted as part of the complex nature of being human. They are not resisted so much as accepted for what they are: scary thoughts, upsetting emotions, and uncomfortable sensations. Moreover, these upsetting experiences are not labeled as threats, and as such, they do not trigger the fight, flight, or freeze responses that expand the OCD universe. Without that expansion, there can be no OCD universe. Might we apply this knowledge to devise a way of traveling between universes? Here's what we know so far: misplaced survival responses that follow intrusive thoughts, emotions, or physical sensations give rise to the OCD universe. In other words, compulsions, avoidance, and paralysis maintain obsessions in awareness by providing the necessary gravitational pull to hold the whole system together. Remove that gravity, and the system unravels. Upsetting thoughts return to the choir of other thoughts, intolerable emotions ease, and physical sensations dissipate.

We have found the elusive wormholes, the structures that allow you to travel from one universe to the other. The key to this travel involves disrupting the immediate sequence of events upon OCD's arrival. Since OCD arrives each day anew, you will have plenty of opportunities to practice navigating out of the OCD universe.

So how can you accomplish this? Pay very careful attention the next time OCD makes an appearance. It will arrive as an uncomfortable experience. Begin by taking a deep breath and trying to remain relaxed. This stance will counter any freezing response from you. Next, mindfully observe the intrusive thought, memory, image, emotion, or physical sensation with the keenness of a cosmologist and study its every move. See if you can do so without making assumptions, getting pulled into the past or future, or judging your inner experience as right or wrong, good or bad. Your direct observation here represents an approach response and counters any urge to flee. Finally, do your best to block compulsions, since these behaviors constitute fighting responses.

You have now denied OCD the survival responses that fuel its rapid expansion. Stay on this course as long as you can. You are traveling through a wormhole, and it will be a bumpy ride. As you practice honing these maneuvers over and over, you will eventually learn to pass through the wormhole with greater and greater ease. You will know you have arrived back in the conventional universe when your mind can once again experience the lightness and joy of living in a world with far weaker emotional gravity.

Copyright © 2020, David J. Keuler, PhD Author, Healing from Obsessive-Compulsive Disorder: A Mindfulness-Enhanced CBT Approach to Regaining Control and Restoring Peace of Mind.

Institutional Member Updates

Institutional Members of the International OCD Foundation are programs or clinics that specialize in the treatment of OCD and related disorders. For a full list of the IOCDF's Institutional Members, please visit **iocdf.org/clinics**.

AMITA ALEXIAN BROTHERS CENTER FOR ANXIETY AND OCD 1650 Moon Lake Blvd Hoffman Estates, IL 60169 (847) 755-8566 anxiety@amitahealth.org amitahealth.org

AMITA Health continues to offer evidence-based treatment at all levels of care for individuals struggling with OCD, anxiety disorders, and PTSD. Virtual treatment is now available at the PHP and IOP level of care for individuals across the country in need of care. Please call (847) 252-4081 to schedule a virtual intake. Foglia Family Foundation Residential Treatment Center is accepting new patients for residential care, with increased infection control precautions. Please call (847) 981-5900 for an intake assessment.

THE ANXIETY TREATMENT CENTER OF GREATER CHICAGO

707 Lake Cook Road, 656 Ste 310 Deerfield, IL 60015 (877) 559-0001 West Randolph Street Ste 4W Chicago, IL 60661

info@anxietytreatmentcenter.com anxietytreatmentcenter.com

At the Anxiety Treatment Center of Greater Chicago, we continue to practice adaptability and resilience as we navigate the changing protocols the pandemic presents us. In the ongoing effort to balance safety for our patients and staff with delivering the best care possible, we have been seeing more and more of our patients in person over the last few months. While we are grateful for the ability to do teletherapy, we know that not all patients fully benefit from that platform and live sessions continue to offer the best results for many of our patients and their families. We look forward to the time when we all can move back into full-time in-person therapy.

THE ANXIETY TREATMENT CENTER OF SACRAMENTO 10419 Old Placerville Road, Ste 258

Sacramento, CA 95827 (916) 366-0647

drrobin@atcsac.net anxietytreatmentexperts.com

The Anxiety Treatment Center welcomes Jasmine Kaur, MS, AMFT. She graduated from California State University, Sacramento and holds a masters degree in counseling with an emphasis on marriage and family therapy. Her training includes working within the school and agency settings, working with individuals with a history of anxiety, depression, trauma, and grief. Her experience has allowed her to work with a diverse population. She works to create a nonjudgmental, safe space for individuals, meeting them where they are. Her commitment to helping others comes from a person-centered approach, including cognitive behavioral and narrative therapies, mindfulness, and exposure and response prevention.

We are also pleased to welcome Tara Miskovich, PhD, who graduated from the University of California, Davis with a BA in psychology and received her PhD from University of Wisconsin-Milwaukee in 2018. She completed her practicum experience at Rogers Memorial Hospital's OCD residential treatment program where she gained experience using exposure and response prevention for those suffering from OCD, panic disorder, and other anxiety disorders. She also completed her internship and post-doctoral training years in the Veterans Affairs Northern California Healthcare System where she specialized in serving veterans using evidence-based treatments for PTSD and other diagnoses. Together she offers her experience in CBT, exposurebased therapies, and acceptance and commitment therapy (ACT).

BEHAVIOR THERAPY CENTER OF GREATER WASHINGTON 11227 Lockwood Dr Silver Spring, MD 20759 (301) 593-4040 info@behaviortherapycenter.com

behaviortherapycenter.com

BTC continues to operate exclusively through telehealth. The telehealth platform has not only surpassed our expectations as a treatment delivery format, but appears to have equivalent efficacy and client satisfaction when compared to our brick and mortar services.

We are pleased to announce our new externs, Kerry Kelso, who comes from George Mason University, and Zach Appenzeller, from the Chicago School of Professional Psychology in Washington, DC. And we are excited that our clinician Kevin Young just joined Ruth Golomb as co-director of our externship program. As part of the externship, BTC provides didactic trainings on a variety of topics, including OCD and related conditions.

BTC's professionally assisted GOAL OCD support group continues to run strong via telehealth. If interested in our GOAL group or therapy groups offered at BTC, please contact us at *info@behaviortherapycenter.com*.

And perhaps most importantly, our very own Brad Hufford, a new member of the OCD Mid-Atlantic board, ran 10 miles and raised \$600 for the Virtual 1 Million Steps 4 OCD Walk!! Go Brad!!

Institutional Member Updates (continued)

BIO BEHAVIORAL INSTITUTE 935 Northern Blvd Great Neck, NY 11021

(516) 487-7116 sonykhemlani@yahoo.com biobehavioralinstitute.com

Bio Behavioral Institute will be launching a series of telehealth groups this fall and winter. We will be offering two coping skills groups for children and adolescents using a CBT evidencebased curriculum called the Unified Protocol for Youth. This time-limited group will teach strategies for a range of negative emotions including anxiety, worry, anger, and sadness. Our children's group is geared for ages 11–14 and our teen group is for ages 14–17. Our weekly adult dialectical behavior therapy (DBT) skills group is open to those who struggle with anxiety, depression, or emotion regulation. Please contact us at (516) 487-7116 to learn more.

COMMUNITY WEST TREATMENT OCD PROGRAM 1990 S Bundy Dr, Ste 320 Los Angeles, CA 90025 (310) 990-0988 lepstein@cwtreatment.com communitywesttreatment.com

The OCD program at Community West has continued to offer PHP and IOP levels of care for adolescents and young people with OCD and related disorders throughout the COVID-19 pandemic. While services were offered remotely during the height of the pandemic, Community West has recently started a hybrid program that includes a combination of remote and in-person services. The OCD program offers daily individual sessions with licensed clinicians, exposure and response prevention, group sessions in ACT, DBT, healthy boundaries, and breath work, as well as family therapy and psychiatry.

CORNERSTONE OCD & ANXIETY GROUP 415 Railroad Ave S Kent, WA 98032 (844) 623-9675

info@cornerstoneOCD.com cornerstoneOCD.com

We just finished our fall internship/practicum quarter with a fresh round of interns while scrambling to make all the changes necessary to work with clients online and satisfy graduate school requirements. We began using a webinar format for psycho-education intakes in online groups using live and recorded staff, intern, and client-advocate interviews. We hope to have our (in-person/online hybrid) Intensive Outpatient Program up and running for winter quarter to whittle down our wait list and get more people into therapy. While COVID-19 has been a struggle for everyone, we're all learning to adjust on the fly and make the most of difficult circumstances. Some of our clients are happy to be back in the office for in-person sessions and some will likely continue online indefinitely as it has been quite convenient. And we're all hoping the new normal includes ongoing insurance coverage of teletherapy!

GENESEE VALLEY PSYCHOLOGY

21 Goodway Dr Rochester, NY 14623 (585) 270-1679 admin@gviproc.org gviproc.org

Genesee Valley Psychology (GVP) has been growing rapidly! We have rebranded as an OCD/Trauma clinic, and have also launched a comprehensive DBT program.

We are now up to 20 clinicians, including three postdoctoral fellows and two practicum students. Our IOP and outpatient programs are fully online, meaning we've provided care across NY state.

We are excited to be launching our first research study on the overlap between trauma/PTSD and OCD symptoms. We are collaborating with Dr. Nathaniel Van Kirk at the OCD Institute/McLean Hospital and look forward to publishing our results soon.

KANSAS CITY CENTER FOR ANXIETY TREATMENT, P.A. 10555 Marty St, Ste 100 Overland Park, KS 66212 (913) 649-8820 info@kcanxiety.com kcanxiety.com

Happy holiday season from KCCAT! This fall we were pleased to welcome Dr. Kristin Gallaway to our team, who joins us for a two-year specialty post doctoral fellowship after completing her PhD in School Psychology from Illinois State University.

We also celebrated the Kansas licensure of our advanced post doctoral fellow Dr. Jennifer Hodgson — congrats, Dr. Hodgson!

As we continue to work from home, KCCAT looks to find ways to use telehealth to get care to those who need it, particularly those struggling to connect during these strange times. We anticipate launching the first-ever VIRTUAL version of our everpopular social exposure group for teens this January! We also continue to hold all of our free support groups over telehealth, some of which are open to the public (*kcanxiety.com/groups*). More ideas for group-based services are in the works, so keep an eye out!



Draw Your Monster!

This OCD Awareness Week, we partnered with Sean Shinnock of Draw Your Monster to launch a community art project! We asked the OCD and related disorders community to join us in the therapeutic practice of drawing your anxiety. Here are some of the many submissions.

Thank you to all who participated!





Institutional Member Updates (continued from page 13)

As always, KCCAT is still operating in full force utilizing our telehealth system, so do not hesitate to reach out to learn more about services or for help in finding resources for yourself or your loved ones.

MCLEAN OCD INSTITUTE // HOUSTON 708 E 19th St Houston, TX 77008 (713) 526-5055 info@houstonocd.org houstonOCDprogram.com

In March, the former Houston OCD Program officially became the McLean OCD Institute // Houston! Due to the COVID-19 outbreak in the U.S. earlier this year, our team worked hard to transition our PHP and outpatient clients to a virtual format without a disruption in services. On June 1st, we were able to reopen our residential support program in-person to accept clients in need of a higher level of care.

In October, we welcomed OCD therapists Aviva Panzer Katz, PhD, and Emily Weems, LCSW to the McLean family as the newest members of our clinical team. Dr. Katz has expertise in utilizing DBT and DBT-Prolonged Exposure for co-occurring PTSD and emotion/behavioral dysregulation. Emily Weems, LCSW brings extensive experience in treating complex, co-occurring trauma and mood disorders in underserved populations.

We look forward to continuing to have our residential program open (currently open and accepting new patients) and are hopeful that we will be able to return our day PHP program in-person sometime in 2021 when we can do so safely. We are grateful and honored for the opportunity to continue serving the OCD and anxiety community and look forward to continuing to do so for years to come!

MGH PEDIATRIC PSYCHIATRY OCD & TIC DISORDERS PROGRAM

185 Cambridge St, Ste 2000 Boston, MA 02114 (617) 643-2780 MGHPediOCDTics@partners.org mghocd.org/pediocdtic

The Pediatric Psychiatry OCD & Tic Disorders Program at MGH is pleased to report that despite moving to entirely remote virtual operations, we have been able to continue expanding our patient base to treat as many children and adolescents as possible.

In June 2020, we were delighted to add Michelle ("Elle") Daoust, LCSW to our staff. Elle has been an incredible asset to the team, providing parental and behavioral coaching as well as bridging behavioral therapy, particularly ERP, for our patients who are on waitlists to establish care with a therapist elsewhere. With Elle's help, we continue to provide evaluations and long-term medication management while supporting with behavioral intervention.

MOUNTAIN VALLEY TREATMENT CENTER 703 River Road Plainfield, NH 03781 (603) 728-8139 clovejoy@mountainvalleytreatment.org mountainvalleytreatment.org

Mountain Valley's Clinical Team recently expanded with the addition of Brittany Little, MSW, LICSW, MT-BC, coming to us from the outpatient clinic at Medical University of South Carolina where she worked with children and adolescents. Prior to that, she spent many years as an adolescent therapist at Rogers Behavioral Health in Brown Deer, WI and an emergency room/trauma center social worker at Children's Hospital of Wisconsin in Milwaukee, WI.

Brittany is a graduate of Appalachian State University with a bachelor of music therapy and the University of North Carolina at Chapel Hill with a master of social work. She enjoyed her years as a music therapist, working with children, teens, and adults and was thrilled at the opportunity to augment her work by becoming a licensed clinical social worker. She completed internships at Duke University Hospital and has a strong background in medical social work.

Brittany is intensively trained in dialectical behavior therapy and has experience providing exposure and response prevention therapy, cognitive behavioral therapy, and traumafocused cognitive behavioral therapy. Brittany is also skilled with individual, group, and family therapy and the treatment of OCD.

NEUROBEHAVIORAL INSTITUTE

2233 North Commerce Parkway, Stes 1 & 3 Weston, FL 33326 (954) 280-3226 info@nbiweston.com nbiweston.com

In these unprecedented times, NBI is forging ahead with a hybrid of virtual and in-person specialized services. Our OCD, anxiety, and stress management group for LGBTQA+ individuals; adult OCD and anxiety support group; and exposure-based therapy group are up and running. Drs. Moritz and Hoffman recently held an Instagram Live on the topic of "When OCD Met COVID" and are planning further live streams for the OCD community.

Our new normal, which has been extremely challenging for so many with OCD and related disorders, is an ongoing

Institutional Member Updates (continued)

consideration for how we continued to provide effective intensive treatment programs during this time period. We have further expanded our parenting program and have also created even more comprehensive care plans for those that need them, which include such modalities as clinical behavioral analysis, executive function training, and nutritional guidance.

With an abundance of caution and strict safety standards, NBI Ranch continues to provide a home away from home for individuals in intensive treatment who also would benefit from a setting providing a higher level of general support and structure, help with life skills and extensive practice generalizing progress, but do not require a more restrictive level of care.

Information about accessing services at NBI and NBI Ranch is available at *nbiweston.com*.

NOCD

Nationwide (312) 766-6780 care@NOCDHELP.COM nocd.com

NOCD is proud to announce that affordable, evidence-based OCD treatment is available nationwide. We are live in all 50 states! Please feel free to visit our website and book a free, 15-minute call with a member of our care team to see how you might be able to get started with a NOCD therapist.

NOCD is also thankful for all that attended our virtual conference in Ohio — we had a fantastic turnout. Further, NOCD was a proud sponsor of the Virtual 1 Million Steps 4 OCD Walk and the OCD Midwest silent auction. Many of our team joined the walk and helped to raise money for OCD Awareness.

Thanks to all who supported OCD Awareness Week — we appreciated partnering with the IOCDF to assure that individuals with OCD get the recognition and support they need.

NOCD also continues to recruit for therapists to join our network. If you are interested, please reach out to us at *network@ nocdhelp.com* and we can get you started working with us.

NORTHWELL HEALTH OCD CENTER

75-59 263rd St Zucker Hillside Hospital Glen Oaks, NY 11004 (718) 470-8052 ocdcenter@northwell.edu northwell.edu/ocdcenter

The Northwell Health OCD Center offers evidence-based, comprehensive outpatient treatment for OCD and related disorders, including body dysmorphic disorder and obsessive compulsive personality disorder (OCPD). It is one of the only specialized OCD facilities in the New York metropolitan area to accept most health insurance plans, including Medicare and Medicaid. Treatment options include individual and group cognitive behavioral therapy as well as medication management.

During the COVID-19 pandemic, we have continued to conduct all services through video platforms and we have also added two new groups. Staff psychologist Dr. Ren Krinick is now leading a virtual weekly treatment group that teaches and supports behavioral activation for patients with OCD who are experiencing depressive symptoms. Staff psychologist Dr. Christine D'Urso is also leading an ERP Practice Group, which provides a space for patients enrolled in individual therapy to practice ERP with the support of fellow group members. We are now proudly offering a total of seven weekly virtual groups. We are glad that amidst this pandemic, we are able to meet the needs of our patients and we appreciate the ongoing support of IOCDF and its Affiliates. Please email us at **ocdcenter@northwell.edu** for more information or to schedule a confidential screening.

OCD & ANXIETY PROGRAM OF SOUTHERN CALIFORNIA 3205 Ocean Park Blvd, Ste 250 Santa Monica, CA 90405 (310) 386-9675 info@socalocd.org

socalocdprogram.org

The OCD & Anxiety Program of Southern California is delighted to welcome Dr. Alexis Hershfield, PhD, our new postdoctoral Fellow, to our team. Dr. Hershfield is a licensed psychological assistant in California (#PS94025626) and joins our team as a behavior therapist. She received her PhD in clinical psychology from the California School of Professional Psychology. She completed her pre-doctoral internship in the Child and Family Track at Didi Hirsch Mental Health Services in Los Angeles, CA. There, she provided therapeutic services to treat a variety of mental health conditions in children and families, provided OCD and anxiety consultations to staff, conducted comprehensive psychoeducational evaluations and early childhood assessments (0-5), and received specialized training in empirically based trauma-informed treatment and multidisciplinary consultation. Dr. Hershfield has trained in a variety of treatment settings including community mental health, research, and integrative care clinics, a university hospital, an OCD intensive outpatient program, and private practice. Dr. Hershfield is interested in raising awareness about childhood anxiety and OCD and enhancing accessibility to evidence-based care.

She is excited to be adding online adolescent social anxiety groups, generalized anxiety groups, and OCD groups this fall and winter to our programming!

Welcome aboard, Dr. Hershfield!

Institutional Member Updates (continued)

THE OCD & ANXIETY TREATMENT CENTER

1459 North Main St, Ste 100 Bountiful, UT 84010 (801) 298-2000

11260 River Heights Dr South Jordan, UT 84095 (801) 298-2000

admissions@liveuncertain.com theocdandanxietytreatmentcenter.com

TOATC is thrilled to continue to offer exposure-based intensive outpatient and outpatient programs to adults and youth. Our new South Jordan center is rapidly growing, and our Bountiful center continues to thrive. Thanks to the launch of our modified "Lil' IOP," we can now work with clients as young as five years old. We are also now offering a BFRB group for youth and adults.

In October, we wrapped up another successful OCD Awareness Week. Our staff and clients enjoyed COVID-friendly onsite activities. We hosted a virtual art exhibit, in which clients and staff were invited to submit works of art that express their experience with OCD. You can explore the virtual art exhibit by heading to our website and clicking on the "OCD Week" tab.

TOATC is excited to announce the launch of our new trauma program. The program will serve individuals with a primary PTSD diagnosis, or individuals experiencing OCD/anxiety disorder symptoms activated by trauma. Trained therapists will utilize prolonged exposure-based treatment via telehealth and onsite sessions. In light of the COVID-19 pandemic, we continue to offer telehealth appointments, in addition to onsite appointments, for our intensive outpatient program and outpatient program.

OCD INSTITUTE AT MCLEAN HOSPITAL 115 Mill St Belmont, MA 02478 (617) 855-2776

ocdiadmissions@partners.org mcleanhospital.org/ocd

The OCD Institute, including members from our adult, child, and Houston programs, were proud to participate in this years' Virtual 1 Million Steps 4 OCD Walk in October. We were able to exceed our \$3,500 fundraising goal, and donations are still coming in! Thank you to all who participated! We were also pleased to be involved in other activities during OCD Awareness Week, including OCDI Houston Program Director Elizabeth McIngvale hosting a hospital-wide webinar about OCD treatment, as well as IOCDF-sponsored Facebook Live events.

Our research team has also been busy publishing articles about treating OCD during COVID-19. Two recent articles have been published, including "Ahead of the Curve: Responses From Patients in Treatment for Obsessive-Compulsive Disorder to

Coronavirus Disease 2019" in Frontiers.org:

frontiersin.org/articles/10.3389/fpsyg.2020.572153/full and "Adapting Exposure and Response Prevention in the Age of COVID-19" in the Behavior Therapist. We are proud to be quickly adapting our evidence-based practice during these turbulent times for our patients and families.

We continue to provide both in-person residential treatment at all our program sites, as well as virtual partial hospital care in Belmont and outpatient and IOP care in Houston. We hope you are all staying healthy!

PALO ALTO THERAPY

407 Sherman Ave, Ste C Palo Alto, CA 94306 (650) 461-9026 info@paloaltotherapy.com paloaltotherapy.com/ocd 940 Saratoga Ave, Ste 240 San Jose, CA 95129

At Palo Alto Therapy, we specialize in cognitive behavioral therapy and have many years of experience in the field of behavioral health helping children and adults overcome anxiety, depression, OCD, panic, social anxiety and other stressrelated problems.

Our newest additions: We are glad to introduce our newest member in both of our locations, our fully licensed therapist Haneen Hassan, LMFT. We are excited to have her join our evergrowing practice with their unique experience and backgrounds.

Anxiety to Wellness Classes: *NEW* We are now offering a class for young adults! Our eight-week groups are open for enrollment for teens, young adults, and adults! This class teaches anxiety-reducing techniques and offers group support. Classes are offered in January, April, and September and are currently only offered via video.

We are hiring! We are hiring new therapists to create a quality team that will match the success of the incredible therapists that we already employ. If you happen to be, or know of any good candidates, please send them our way!

For more information on our individual, couples, family, and group or video therapy, please feel free to contact us.

PERTH OCD CLINIC 24 Colin Street West Perth, Central Australia 6006 (+61) 413-570-222 info@perthocdclinic.com.au

perthocdclinic.com.au

In order to provide a vital, centralised service for the local OCD community, we have brought together Perth's first dedicated team of highly experienced, registered clinical psychologists. Our team has a wealth of clinical experience and special interests in the field of OCD and related disorders.

Institutional Member Updates (continued)

In 2015, Dr. Gayle Maloney, our director, was awarded a Fulbright fellowship to establish an ongoing international research collaboration with Dr. Christopher Pittenger at the Yale OCD Research Clinic. On her return to Perth, Dr. Maloney founded the Perth OCD Clinic, Australia's first specialty outpatient clinic to be listed with the International OCD Foundation

In addition to providing clinical treatment for OCD, we have recently expanded our clinic to become a training and research facility. Details pertaining to our treatment services and training workshops for mental health practitioners are listed on our website.

Finally, we are actively seeking expressions of interest from local clinical psychologists and psychiatrists who are interested in joining our team of dedicated practitioners.

Sending you and your loved ones our best wishes from across the seas this festive season.

RENEWED FREEDOM CENTER FOR RAPID ANXIETY RELIEF 1849 Sawtelle Blvd, Ste 710

Los Angeles, CA 90025 (310) 268-1888 info@RenewedFreedomCenter.com

renewedfreedomcenter.com

Renewed Freedom Center would like to welcome Dr. Ryan Silverman and welcome back Dr. Tanya Abugazahleh to our team!

Dr. Ryan Silverman earned his doctorate degree in clinical psychology from the California School of Professional Psychology, San Diego. He completed his internship and postdoctoral training at WellSpan Philhaven in York, PA where he utilized a CBT approach when working with adults, children, and couples. Dr. Silverman has experience in various treatment settings including a long-term outpatient center and primary care offices, where he addressed mental and chronic healthrelated diseases. Dr. Silverman has experience treating a wide range of disorders including anxiety, mood, trauma, and substance abuse.

Dr. Tanya Abughazaleh earned her doctorate degree in clinical psychology at The Chicago School of Professional Psychology, Los Angeles. She completed her internship at Pennsylvania Counseling Services where she conducted psychological assessments and treated patients with a spectrum of disorders. She has past experience conducting intellectual assessments in a pediatric oncology department and provided individual therapy across various treatment settings. Dr. Abughazaleh has extensive experience treating sufferers with OCD and related disorders after training at RFC as a pre-doctoral intern from 2018–19. She also serves as program director for the Renewed Freedom Foundation.

ROGERS BEHAVIORAL HEALTH

34700 Valley Rd Oconomowoc, WI 53066 (800) 767-4411 rick.ramsay@rogersbh.org rogersbh.org

Rogers Behavioral Health broke ground in early October on the Ladish Co. Foundation Center. Located on its Oconomowoc campus, the Ladish Center is made possible thanks to generous donations from the Ladish Co. Foundation and others, and in partnership with the Ronald McDonald House Charities Eastern Wisconsin. It will offer educational and support groups, a chapel and spiritual care services, and a children's play area. Its Ronald McDonald Family Room will provide a comforting environment in close proximity to where a young family member is receiving care. The center will also be home to the Rogers Behavioral Health Foundation and Rogers Research Center.

For OCD Awareness Week, Rogers held several virtual events including a national CE webinar on OCD treatment, a Facebook Live event on managing OCD during the pandemic, and a screening of UNSTUCK: An OCD Kids Movie followed by a panel discussion featuring mental health advocate and author Jeff Bell and UNSTUCK's Sarah Jackson.

In 2021, Rogers is opening outpatient clinics in Seattle and Sheboygan, Wisconsin. Both will offer partial hospitalization care for those struggling with OCD and anxiety. In addition, the Sheboygan location will offer Rogers' first-ever supportive living services.

STANFORD TRANSLATIONAL OCD PROGRAM — RODRIGUEZ LAB 401 Quarry Rd Stanford, CA 94305 (650) 723-4095 ocdresearch@stanford.edu

rodriguezlab.stanford.edu

The Stanford Translational OCD program utilizes an interdisciplinary approach to find new treatments for patients suffering from OCD and hoarding disorder. We invite you to find out more about our current research studies by calling or emailing. We also invite you to follow us on Twitter and Facebook @RodriguezLabSU.

In collaboration with OCD SF Bay Area, we organized a free webinar for the community on October 17th, during OCD Awareness Week. Stanford faculty and representatives from the private sector spoke on medications, psychotherapy, DBS, psychedelics, digital interventions, TMS, Tourette's, PANS/ PANDAS, and supporting loved ones.

Institutional Member Updates (continued)

Sadly, we are mourning the death of our wonderful colleague Dr. Anthony Lombardi, who passed away on October 13th. He was a clinical instructor at Stanford and a licensed clinical psychologist at Pacific Anxiety Group in Menlo Park, CA. Prior to his postdoctoral fellowship with us, Anthony received his PsyD from Pacific University and completed his predoctoral internship at the West Palm Beach VA Medical Center. He was an empathic, highly skilled, and remarkably effective clinical psychologist who specialized in OCD and other anxiety disorders. His family has asked that all who wish to make an expression of sympathy donate to the IOCDF.

STRESS AND ANXIETY SERVICES OF NJ, LLC A-2 Brier Hill Ct 195 Columbia Tpke

East Brunswick, NJ 08816 (732) 390-6694 195 Columbia Tpke, Ste 120 Florham Park, NJ 07932

allen.weg@stressandanxiety.com StressAndAnxiety.com

Stress and Anxiety Services of NJ (SASNJ) is thrilled to have Dr. Charity Wilkinson Truong return to her full-time status at our clinic. Charity had moved to get a job in Texas, but over the last year continued to virtually treat a few people a week at our practice from Texas. While remaining in the Lone Star State, she is now seeing a full caseload of our clients.

We are also excited to announce our newest post-doc on staff, Dr. Cara Genbauffe, a graduate of the PsyD program at Rutgers Graduate School of Applied and Professional Psychology (GSAPP). Cara comes to us with a host of relevant clinical experiences, including a stint at Mount Sinai OCD and Related Disorders Program in New York City. In October, SASNJ served as the CE sponsor for the OCD New Jersey affiliate (virtual) annual conference, and Dr. Allen Weg, Executive Director of SASNJ, moderated the Living with OCD panel for the conference.

SASNJ has been posting weekly instructional videos on Facebook and LinkedIn — please "like" us and follow us to get our latest updates and videos! We have resumed our OCD Tips series, which may also be found on our YouTube page.

We continue to work almost exclusively virtually these last few months, and are now searching for OCD-experienced psychologists to join our team as virtual therapists if they have a NJ psychology license. Details may be found on our website on the Join Our Team page. Wishing you all safety and health as we continue to struggle with this pandemic!

THE WESTWOOD INSTITUTE FOR ANXIETY DISORDERS 921 Westwood Blvd, Ste 223 Los Angeles, CA 90024 (310) 443-0031 thewestwoodinstitute@gmail.com hope4ocd.com

The Westwood Institute for Anxiety Disorders is launching a specialized prenatal and postpartum program for young mothers and parents. This program will include Zoom lectures to groups that are interested in prenatal and postpartum education. Workshops will also be provided. The program will also include an in-person, specialized one-on-one training in OCD. This training in exposure and response prevention will be individualized per case and given to young parents. The program will be conducted by experts. The WIAD team is welcoming new members to our program: Alexander Gorbis, MA, Cinzia Roccaforte, PsyD, and Joshua Baysa.

Do You Want Your Article Featured in the OCD Newsletter?

The IOCDF is accepting personal stories, poems, therapy and research article submissions for upcoming Newsletter editions.

Submissions can be sent to *editor@iocdf.org*.



2021 Research Grant Program Call for Proposals



The International OCD Foundation is pleased to announce that we will once again be offering research grants to scientists investigating OCD and related disorders. Over \$750,000 in total research funding will be awarded in 2021 through a competitive process. Applications from researchers will be accepted beginning January 4, 2021, with a deadline of March 1, 2021.

Grants available in 2021 will include:

- Innovator Awards \$300,000 grants for senior researchers investigating OCD. The goal of these awards is to support research with the potential to revolutionize scientific understanding of OCD, accelerate progress toward new and more effective treatments, and discover ways to prevent OCD from taking hold in the first place. The Innovator Awards are made possible through the generosity of an anonymous donor to the IOCDF.
- Michael Jenike Young Investigator Awards Grants of up to \$50,000 for early career researchers pursuing projects investigating OCD, BDD, hoarding disorder, or other disorders related to OCD.

• Race, Ethnicity, and Culture — Through funding raised by OCD Jacksonville, the IOCDF has created a dedicated fund to support research on the role that race, ethnicity, and culture play in OCD and related disorders, including how they influence symptoms, diagnosis, treatment, and treatment access. These awards will be made through the Jenike Award program, and are available to all early career researchers.

All grant applications will be evaluated by a panel of volunteer scientists, including many of the leading experts in OCD and related disorders research. This panel's recommendations ensure that precious research dollars — 100% of which are contributed by donors — are directed to the strongest possible research with the greatest potential for impact.

Applications will be accepted beginning January 4, 2021 at **ocdresearch.org**. Complete application instructions, guidelines, and the official 2021 request for proposals (RFP) are also available to read at **ocdresearch.org**.

If you would like to support OCD research with a financial contribution to our Research Grant Program, please visit **iocdf.org/donate**

Extending the Reach of Hoarding Research: Collaborating in Order to Connect with and Better Understand More Complicated Cases of Hoarding

by Peter Lenkic, MA, Maria Bleier, BS, Patricia Jiang, BFA, Christina Bratiotis, PhD & Sheila Woody, PhD

Hoarding disorder involves extreme difficulty parting with possessions that other people would fairly easily discard, recycle, or donate. As a result of this difficulty, the home gets filled up with stuff — so much that it starts to interfere with enjoyment of the home or doing things like preparing food, finding important things, or sleeping in the bed. Shame about the conditions in the home may prevent the person from letting anyone inside, leading to social isolation and loneliness. Family members sometimes become worried and frustrated, resulting in arguments and conflict.

At the Centre for Collaborative Research on Hoarding, researchers and members of the community work together to learn more about strategies to help with these problems. Our work with community-based hoarding teams led us to question the degree to which university-based research is directly applicable to cases of hoarding that come to community attention — clients who would be unlikely to volunteer for research studies on hoarding. Although university-based research provides the scientific foundation for innovations in treatment for hoarding, it is important to know the limitations of knowledge gained with that approach — an approach our Centre also uses.

We set out to examine this question by comparing the characteristics of participants in university-based research with clients who are served by community agencies that aim to prevent eviction, ensure fire safety, and promote the wellbeing of older adults. Here we describe some of the results of our research showing that community-based clients with hoarding have more clutter and experience more fire risks and complicated personal histories than do research volunteers with hoarding.

Our recent study (Woody, Lenkic, Bratiotis, et al., 2020) was made possible by the contributions of several community and research teams and data from 824 persons with lived experience of hoarding. Our community agency partners were the Hoarding Action Response Team (HART) in Vancouver, Canada, the Gatekeepers program in Hamilton, Canada, and the Metropolitan Boston Housing Partnership (MBHP; now called Metro Housing Boston) in Boston, USA. Each agency had specialized programs and mandates to help people who were having problems related to hoarding. For example, the Gatekeepers program aimed to help independently living older adults at risk of neglect, MBHP's primary goal was to prevent eviction due to hoarding, while HART promotes fire safety and connects clients with health referrals. Our university research data comes from studies published by Randy Frost and his colleagues in 2011, David Tolin and his colleagues in 2012, and from research data we have collected in our own Centre since 2016.

To conduct the study, we first examined data from clients who received hoarding-related services from the three community agencies, and we compared these clients with research participant data from the three hoarding research groups. We found that the homes of clients who had been referred to community agencies for hoarding had more clutter than the homes of research study participants. On average, community-referred homes scored 1.5 points higher on the widely used Clutter Image Rating scale (Frost et al., 2008; available on the IOCDF website). In comparison with the homes of research volunteers, the homes of communitybased clients were twice as likely to have fire hazards, such as combustible material stacked close to a heat source, and six times more likely to have difficulty accessing emergency exits. These safety risks were attributable to the higher clutter volume in community-referred homes. The homes of clients referred to community agencies were also 5.5 times more likely than the homes of research volunteers to have unhygienic conditions, such as pest infestations or overflowing garbage. More specifically, community agency staff rated about 50% of the homes of their clients as having some degree of squalor, while only 16% of the research volunteers reported similar conditions in their home. In short, these findings suggest that researchers who rely on participants who volunteer for research on hoarding may not be getting the whole picture; hoarding cases that come to the attention of community agencies appear to involve more severe health and safety problems.

Not only did conditions in the home differ between university-based research volunteers and community agency cases, but these groups seemed to reflect different segments of the population. Research volunteers were more likely to be women (77%), White (83%), and to have good insight about the problems associated with their hoarding (84%). In contrast, among people with hoarding who had come to the attention of community agencies, men and

Extending the Reach of Hoarding Research (continued)

women were more equally represented (55% were women), there was more racial/ ethnic diversity (60% were White), and clients were much less likely to have good awareness (48%) of the severity or consequences of hoarding behavior. We also noted that community-referred ⁶⁶ In trying to understand the sources of the differences between community-based clients and research volunteers, one hypothesis that we have is that the stigma of hoarding plays an important role. In more severe hoarding situations, including those that result in referral to a community agency for assistance, there is often a long track record of either extreme social isolation (e.g., no one has come into the home for 10 years) or conflict with family members, neighbors, or housing providers. The stigma associated with such a situation would inhibit most people from volunteering for research on the topic of hoarding. phenomenon and treatment of hoarding to be applicable to everyone with hoarding, researchers and community partners need to work together to better understand the full range of hoarding. The bottom line is that, as researchers, we may be looking at hoarding

clients with hoarding might have more complicated personal histories than do research volunteers, including problems with health, housing, and social isolation, although the research samples and community agency measures of these types of problems were difficult to compare directly. For example, 31%–45% of the cases in the community agencies' caseloads were at risk of eviction due to hoarding, whereas 22% of research volunteers reported having "house/landlord issues."

In trying to understand the sources of the differences between community-based clients and research volunteers, one hypothesis that we have is that the stigma of hoarding plays an important role. In more severe hoarding situations, including those that result in referral to a community agency for assistance, there is often a long track record of either extreme social isolation (e.g., no one has come into the home for 10 years) or conflict with family members, neighbors, or housing providers. The stigma associated with such a situation would inhibit most people from volunteering for research on the topic of hoarding.

The differences found suggest that community cases of hoarding appear to be guite different from research volunteers, not only in their personal characteristics with community cases having more diverse backgrounds - but also in higher clutter volume, and the fire safety issues that can arise in that context. This is a good lesson for researchers, as we aim to have the results of our research be as broadly applicable as possible. If we are studying hoarding with the help of research volunteers who do not report as many problems and have different social circumstances to those who are not participants, we won't be sure if our findings paint the whole picture about the disorder. Some of our research findings might not apply to more severe hoarding, or we might be missing an opportunity to develop interventions that would be effective with more diverse clients. For research on the

through a smaller window than we had once thought. Clearly then, there is a need for more interdisciplinary research in this area.

Our lab's current projects aim to greatly facilitate this kind of interdisciplinary research and improve outcomes in community-based hoarding treatment. We are again partnering with many community agencies to develop best-practice guidelines for community-based harm reduction approaches to hoarding, and to create a new assessment tool that can be used across organizations. We hope that through these joint efforts with multiple partners, each with their own special focus and insight into hoarding, we will create new guidelines and tools that can fully capture the complexity of hoarding disorder. These will be important steps that will further our lab's mission to better understand the multifaceted nature of this disorder through collaborative research. For more about our research, please visit our website (*hoarding.psych.ubc.ca*).

The Centre for Collaborative Research on Hoarding is a research lab in the Department of Psychology at The University of British Columbia, located in Vancouver, Canada and directed by Dr. Sheila Woody. We are an interdisciplinary research team that includes research collaborators from the UBC School of Social Work (Dr. Christiana Bratiotis) and Department of Sociology (Dr. Nathan Lauster), as well as partnerships with diverse community agencies in the US and Canada.

REFERENCES

Frost, R. O., Steketee, G., Tolin, D. F., & Renaud, S. (2008). Development and validation of the clutter image rating. *Journal of Psychopathology and Behavioral Assessment*, *30*(*3*), 193–203. https://doi.org/10.1007/ s10862-007-9068-7

Woody, S. R., Lenkic, P., Bratiotis, C., Kysow, K., Luu, M., Edsell-vetter, J., ... Tolin, D. F. (2020). How well do hoarding research samples represent cases that rise to community attention? *Behaviour Research and Therapy*, *126(June 2019)*, 103555. https://doi.org/10.1016/j.brat.2020.103555

Research Participants Sought

The IOCDF is not affiliated with any of the following studies, although we ensure that all research studies listed on this page have been reviewed and approved by an Internal Review Board (IRB). The studies are listed alphabetically by state, with online studies and those open to multiple areas at the beginning.

If you are a researcher who would like to include your research listing in the OCD Newsletter, please email Will Sutton at **wsutton@iocdf.org** or visit **iocdf.org/research**.

Do you have a child with autism spectrum disorder (ASD) and anxiety or OCD?

Researchers at Baylor College of Medicine and Texas Children's Hospital are conducting treatment studies for children aged 4–14 with ASD and anxiety symptoms (worries and fears). Participants receive free parent-led cognitive behavioral therapy (CBT), and those who qualify may also receive free therapist-led CBT. We offer a \$40 compensation for each completed assessment and there is no cost to participate.

All treatment sessions and assessments take place over Zoom. Participants must be located in Texas.

To learn more about current projects and eligibility, please contact us at **anxietyandASD@bcm.edu** or (713) 798-8563.

Are you a healthy adult who has a sibling with obsessive compulsive disorder (OCD)?

We are looking to recruit people with OCD along with their siblings who do not have the disorder for a study looking at the neurobiology of OCD and family risk at the Nathan Kline Institute. You must be between the ages of 18 and 60 and in good physical health, and have a sibling with OCD who would also be interested in participating in this research study.

If eligible, we will ask you to come in for one to three separate appointments for a total time commitment of approximately four to 10 hours. You will be reimbursed for your participation at a rate of \$25 per hour.

During this experiment you will be asked to complete some computer tasks while having your brain activity measured using functional magnetic resonance imaging (fMRI). We will also ask you about your health and to fill out some questionnaires about your emotions.

If you want us to contact you to tell you more about the study, please fill out our study interest form: surveymonkey.com/s/PNCLab

For more information, call the Psychiatric NeuroCognition Laboratory at (845) 398-6563, email us at *pnclab@nki.rfmh. org*, or visit us at *psychneurocoglab.com*. Please do not disclose any personal or sensitive information via email.

Interested in participating in Obsessive-Compulsive Disorder research?

If you have obsessive compulsive disorder, you might be eligible for a research study looking at the neurobiology of the disorder at the Nathan Kline Institute. You must be between the ages of 18 and 60 and in good physical health. If eligible, we will ask you to come in for one to three separate appointments for a total time commitment of approximately four to 10 hours. You will be reimbursed for your participation at a rate of \$25 per hour.

During this experiment you will be asked to complete some computer tasks while having your brain activity measured using functional magnetic resonance imaging (fMRI). We will also ask you about your health and to fill out some questionnaires about your emotions.

If you want us to contact you to tell you more about the study, please fill out our study interest form: surveymonkey.com/s/PNCLab

For more information, call the Psychiatric NeuroCognition Laboratory at (845) 398-6563, email us at *pnclab@nki.rfmh. org*, or visit us at *psychneurocoglab.com*. Please do not disclose any personal or sensitive information via email.

CBT & Imaging Study for Pediatric OCD

The Cognitive Development Lab at Columbia University Irving Medical Center is currently recruiting new participants for our CBT & Imaging Study for Pediatric OCD. This study aims to understand brain abnormalities underlying OCD by assessing brain changes following treatment with cognitive behavioral therapy (CBT) and exposure and response prevention (ERP).

By participating in our OCD treatment and research program, children with OCD will receive:

- A full diagnostic evaluation
- Three months of CBT and ERP at no cost

Who is eligible to participate?

Participants must:

- Be between seven and 14 years old
- Show symptoms of obsessive compulsive disorder (OCD)
- Not be taking any current psychiatric medications or participating in psychotherapy

Research Participants Sought (continued)

Study Procedures:

- A thorough diagnostic evaluation
- 12 sessions of cognitive behavioral therapy (CBT) with exposure and response prevention (ERP) via telehealth
- MRI scans before and after CBT treatment

Compensation:

Study evaluations and treatment will be provided at no cost. In addition, families will receive compensation of up to \$300 for participating in the study.

Interested in Learning More?

Contact us!

Phone: (646) 774-5868 Email: ocstudy@nyspi.columbia.edu Leave an inquiry: recruit.cumc.columbia.edu/clinical_trial/1008

OCD Relationship Study

This project is designed to further understand the interaction of obsessive-compulsive symptoms in an interpersonal context. For that reason, we are seeking individuals over the age of 18 who have been living with a romantic partner for at least one year, and have been diagnosed with obsessive compulsive disorder.

The survey is online and takes approximately 20 minutes to complete. Participants will be compensated with a \$10 Amazon e-gift card. The survey is anonymous and can be conducted anywhere on any device with Internet access.

To participate in the study, participants can use the following link: *bit.ly/ocdstudy2020*

If you have any questions about this study, please contact principal investigator Andrew De Leonardis (*iit.study2019@gmail.com*). This project has been approved by IIT's Institutional Review Board, IRB Protocol number 2019-041. The Executive Officer of IIT's Institutional Review Board can also be reached at (312) 567-7141 or *irb@iit.edu*.



FROM THE AFFILIATES

Affiliate Updates

Affiliate Updates

Our affiliates carry out the mission of the IOCDF at the local level. Each of our affiliates is a non-profit organization run entirely by dedicated volunteers. For more info, visit: iocdf.org/affiliates



OCD CENTRAL & SOUTH FLORIDA

ocdcsfl.org

OCDCSFL was thrilled to participate in many of the virtual events held for OCD Awareness Week 2020, such as the Virtual 1 Million Steps 4 OCD Walk. We also hosted our own virtual event for OCD Awareness Week 2020. On Sunday, October 11th, 2020, Jonathan H. Hoffman, PhD, ABPP delivered a keynote address on What I've Learned About OCD in 30+ Years of Practice. Dr. Hoffman discussed the everchanging landscape of OCD and its treatment, historically and to the present day. He also addressed the many challenges that can arise in OCD treatment, as well as the power of community, collaboration, and advocacy. A second presentation by Ashley Ordway, LMHC, Victoria Schweiger, LMHC, and Frank Morelli, LMHC entitled Paradoxical Love: How to Support and Challenge a Family Member with OCD, focused on family accommodation, family dynamics, and tips to help families navigate many of the problems faced when living with someone with OCD. The event was geared towards everyone — affected individuals, family members, and clinicians. Recordings of all of these events are available on our website if you missed them!

Given that our affiliate spans a large region, a current goal for OCDCSFL is to build a base of volunteers to help with our cause. This might involve helping to host events in your area, presenting on a relevant topic, or working with us behind the scenes. If you are interested in getting involved, please email us at *info@ocdcsfl.org*.

Check out our website for information about our events, and to learn more about OCD Central & South Florida. You can also find us on Facebook @OCDCSFL. Contact us at *info@ocdcsfl.org* if you have any questions!

OCD LOUISIANA ocdlouisiana.org

Team OCD Louisiana would like to send thanks to our donors who raised over \$900 for the Virtual 1 Million Steps 4 OCD Walk! We look forward to the possibility of connecting with our community in person in 2021. As many of you know, there are very few providers in the state with expertise in the treatment of OCD and OC-spectrum disorders, so OCD Louisiana has started hosting a monthly virtual consultation group for professionals. We hope to create an opportunity for a broad range of practitioners and trainees to discuss cases with specialists in these disorders. We consult about diagnostic and treatment questions related to OCD and OC-spectrum disorders, with a focus on evidence-based practice. Lastly, we are looking to expand our network of volunteers who are interested in becoming more involved with the Affiliate so that we can better serve Louisianans. If interested in joining the consultation group or getting more involved with the Affiliate, please email us at info@ocdlouisiana.org.

OCD MASSACHUSETTS ocdmassachusetts.org

OCD Massachusetts has launched its annual lecture series! Usually we have three different inperson series; one in Belmont, Worcester, and Northampton, but due to COVID-19 restrictions we have taken our series virtual. To view the schedule, please visit our website and follow us on facebook, Instagram, and twitter.

On October 10th, supporters and members of the OCDMA board





FROM THE AFFILIATES

Affiliate Updates (continued)

gathered together at Quinsigamond State Park in Worcester to walk for the Virtual 1 Million Steps 4 OCD Walk and also kick off OCD Awareness Week! It was a successful walk and our team did a great job accomplishing our fun



accomplishing our fundraising goal.

OCD MID-ATLANTIC ocdmidatlantic.org

We were excited to participate in this year's Virtual 1 Million Steps 4 OCD Walk during OCD Awareness Week and are proud to report that OCD Mid-Atlantic raised over \$3,000! Our top contributor, board member Brad Hufford, raised \$600 running 10 miles at 10am on 10/10!

OCD Mid-Atlantic also used OCD Awareness Week to start a monthly "Get to Know your Board Members" series on our website and facebook pages, with board members sharing a short description of themselves and how they became involved with IOCDF and the local Affiliate. Thanks to Amey Upton for being first! Stay tuned for next month's story.

OCD NEW JERSEY

ocdnj.org

OCD New Jersey held their 20th annual conference on Sunday, October 25th. Our keynote speaker was Dr. Eric Storch, who, among other responsibilities, oversees the CBT for OCD program at Baylor College of Medicine. Dr. Storch's presentation covered two areas: "Clinical complexities in treating youth with OCD: Tips for parents and professionals," and "Determining the right level of care for people with OCD." We also had a six-person Living with OCD panel. Panelists ranged in age from 13 through 41, and were amazing! The conference was virtual, of course, which allowed for people from a larger geographical area to attend (including internationally). Thanks to OCDNJ Board member Nikki Torella for all her hard work in putting together our first virtual event, and to Wilhelm Engelbrecht, the senior events coordinator at the IOCDF, for training Nikki in running a virtual event and supporting her in the process.

OCD NEW YORK

ocdny.org

OCD New York would like to thank our treasurer Scott Sokolow for his tireless effort in raising over \$15,000 for the Virtual 1 Million Steps 4 OCD Walk, making him and Team OCD NY the highest fundraiser this year. We are extremely grateful to everyone who generously contributed. For OCD Awareness Week, we partnered with a local gym for a Facebook Live total body workout and also hosted a presentation "Overcoming Your Fears of Exposure Therapy for OCD." We will be hosting more online events to support our NY community through these difficult times. Please see a list of events at our website.

OCD OREGON

ocdoregon.org

OCD Oregon participated in the Virtual 1 Million Steps 4 OCD Walk. Our 14 team members raised \$2,207. But we really miss getting together in person and visiting. During OCD Awareness Week, OCD Oregon held their second Annual Art Show. This year the format was held virtually on our Instagram account (@ocdoregon) to continue the support, education, and building of community while in the midst of the pandemic.

Our local partner, Northwest PANDAS/PANS Network, held several events for International PANDAS/PANS Awareness Day including two Grand Rounds held at Oregon Health & Sciences University with subject experts out of Stanford University. In addition, NWPPN has two legislative bills being introduced for the 2021 session including a permanent awareness day bill in Washington and an insurance pay parity bill in Oregon.

OCD SOUTHERN CALIFORNIA

ocdsocal.org

Our board of directors would like to give a huge thank you to everyone who made OCD Southern California's OCD Awareness Week event a huge success! On Saturday, October 10th, OCD So Cal kicked off this year's awareness week with an interactive, virtual event titled Support for Families. The entire OCD So Cal board spoke at the event, supporting the over 150 families in attendance. OCD So Cal's president, Barbara Van Noppen, PhD, LCSW did a family accommodation presentation. OCD So Cal board member Jenny Yip, PsyD presented on kids, teens, and OCD. Our secretary, Melissa Mose, LMFT discussed treatment resistance, and board member Sean Sassano-Higgins, MD educated the audience on medications.

27

FROM THE AFFILIATES

Affiliate Updates (continued)

For the last half of the event, Vice President Chris Trondsen, MS, AMFT, APCC along with treasurer Patricia Bosvay and board member Liz Trondsen, ran the Family and Loved Ones OCD Support Group, allowing attendees to share, ask questions, and support other families with similar experiences and struggles. We had such an overwhelmingly positive response to the event that OCD So Cal ended up having Support for Families: Part 2, discussing more topics relating to families and OCD on Saturday, November 14th.

OCD So Cal participated in the IOCDF's Virtual 1 Million Steps 4 OCD Walk! The walk started on October 10th after a virtual kickoff event encouraging members of the OCD community to safely walk outside with friends and family in the name of OCD awareness! We want to thank everyone in the Southern California area who participated, donated, and helped spread the word! This event fell on the day before OCD Awareness Week 2020. It helped kick off an incredible week of education, understanding, and community!

During OCD Awareness Week 2020, OCD So Cal also supported and virtually attended the National Alliance on Mental Illness' (NAMI) virtual walk and fundraising event. OCD So Cal was the only organization representing the OCD community, allowing us to bring education and awareness to a broader mental health community. Additionally, Chris Trondsen was featured in a recent IOCDF blog post titled From Struggle to Success: My BDD Journey from Childhood to Today that was posted during OCD Awareness Week. In the post, he shared his story and journey to recovery from body dysmorphic disorder (BDD), an OCD-related disorder. You can find the blog post by clicking the 'blog' tab on the IOCDF's BDD website: **bdd.iocdf.org**.

To find out more about next year's in-person conference, as well as more information on what OCD So Cal has planned for the new year, please visit our website and our social media sites: *Instagram.com/OCDSoCal* and *Facebook.com/OCDSoCal*. Thank you!

OCD TEXAS

ocdtexas.org

OCD Texas had a blast leading up to the Virtual 1 Million Steps 4 OCD Walk and our Annual Conference. This year, our October conference went virtual, spanning the week of October 3–10 with daily presentations to cover a range of OCD-related topics. Many thanks to our presenters: Tyson Reuter, PhD, Melissa Fasteau, PsyD, Christen Sistrunk, LPC, Molly Martinez, PhD, Saharah Shrout, LPC, Justin Hughes, LPC, Andrea Alvarez, LPC, Michelle Ruiz-Deal, LPC, Elizabeth McIngvale, PhD, LCSW, Mary Kathleen Norris, LPC, Ginny Fullerton, PhD, Cali Werner, LCSW, and Ivy Ruths, PhD. The event could not have been the success that it was without the dedicated and talented support of our social media volunteer, Mikayla Leech. Contact *info@ocdtexas.org* to inquire about viewing recorded content. Continuing education credits may be provided for select topics for licensed clinicians in Texas.

Looking ahead, OCD Texas is excited to announce our new Ambassador in San Antonio: Andrea Alvarez, LPC. Andrea is looking forward to further supporting her community with OCD awareness and education.

OCD Texas remains proud to sponsor the IOCDF Behavior Therapy Training Institute (BTTI), although it has been postponed to December 2021. A guiding principle of the OCD Texas mission is to educate professionals about OCD and related disorders in order to improve the quality of treatment and access to appropriate resources.

OCD WISCONSIN

ocdwisconsin.org

OCD Wisconsin held its first-ever livestream event in recognition of OCD Awareness Week. The event included a screening of the movie UNSTUCK: An OCD Kids Movie, followed by an Ask the Experts panel discussion that featured clinicians and people with lived experience.

Pre-pandemic, we held these events in a limited number of in-person venues with a typical attendance of 25–50; with the virtual format we had nearly 100 registrants from around the world. We partnered with the Adel B. Korkor Foundation, whose mission is to raise awareness and address the barriers to care in mental health systems.

We participated in the IOCDF's first Virtual 1 Million Steps 4 OCD Walk, prompting us to set up our first Instagram account to promote participation. We sent out messaging via Facebook, Twitter, emails, and our website as well, engaging 32 team members!