



The image shows a Merriam-Webster logo on the left, consisting of a red circle with a white border containing the text "Merriam-Webster". To the right of the logo, the text "SINCE 1828" is displayed. Below this, the word "motivation" is written in a large, black, serif font. To the right of the word is a small red icon of a speech bubble with a white "e" inside. Below the word, the phonetic transcription "/mə-ti-ˈvā-shən/" is shown in a smaller, black, sans-serif font. Below the transcription, the text "Popularity: Top 10% of words | Updated on: 18 Jul 2018" is displayed in a small, black, sans-serif font. Below this, the text "Definition of MOTIVATION" is written in a bold, black, sans-serif font. Below the definition, there are two numbered items. Item 1 is "a : the act or process of motivating • Some students need *motivation* to help them through school." Item 2 is "a motivating force, stimulus, or influence : INCENTIVE, DRIVE" followed by two bullet points: "• The Old Testament heroes added religious *motivation* to the waging of war —Richard Humble" and "• The fear of failure was the *motivation* for his achievements."

Merriam-Webster

SINCE 1828

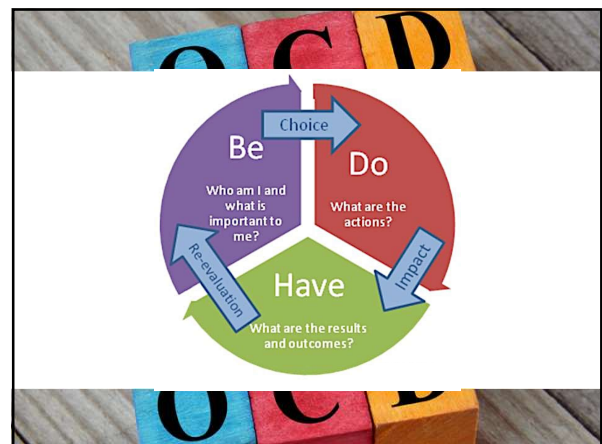
# motivation


noun | mə-ti-ˈvā-tion | \mə-tə-ˈvā-shən\

Popularity: Top 10% of words | Updated on: 18 Jul 2018

## Definition of MOTIVATION


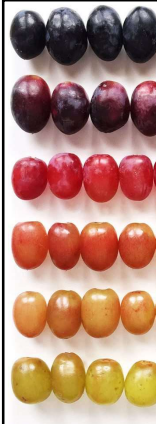
- 1 a : the act or process of motivating • Some students need *motivation* to help them through school.  
b : the condition of being motivated • employees who lack *motivation*
- 2 : a motivating force, stimulus, or influence : INCENTIVE, DRIVE
  - The Old Testament heroes added religious *motivation* to the waging of war —Richard Humble
  - The fear of failure was the *motivation* for his achievements.



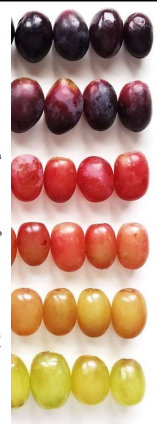

### Ways to Stay Motivated

- **Take It Day-By-Day:**  
Short term goals are the best. Thinking of what you have to accomplish all together is overwhelming. Focus on today. You can "start over" minute-by-minute; you do not have to wait until the next day—or week!
- **Keep Track Of Your Progress:**  
Research has shown that when you keep track of your progress, you are more likely to succeed! You can keep track with pen and paper, or on your phone. It does not matter how, just make sure you are doing it!
- **Exposure (ERP) Homework To-Do List:**  
Either with your therapist or on your own, create an OCD exposures to-do list for yourself and check off when you've accomplished an exposure— it is so satisfying! When you've done all the exposures on the list, reward yourself with guilty pleasures like your favorite television show or your favorite snack!
- **Motivating Stories:**  
There is a popular OCD themed podcast titled "OCD Stories." The podcast is also uploaded onto the OCD Stories Youtube page. There are also other motivational talks and speakers, which can also be found on the International OCD Foundation (IOCDF)'s official Youtube channel. Listen to these motivational talks before doing exposures to motivate yourself to complete the OCD homework.


### Ways to Stay Motivated Continued

- **A Positive Mantra / Mindset:**  
Negative feelings give off negative energy. Create and repeat to yourself a positive mantra. When you feel down or are struggling to fight OCD, tell yourself daily "I am enough, who I am is enough, what I do is enough and what I have is enough." This gives yourself positive thoughts and feelings to get through what ever negative experience with OCD you are having.
- **The OCD community:**  
Getting involved with your local OCD community, such as through the local official IOCDF affiliate in your area, keeps you accountable without being judged. The community often praises you when you are doing well! It is a non-judgmental support system.
- **Long Term Goals:**  
Have a reason you are fighting for to motivate you to do the work. Is it to be able to go back to college? So you can play sports again? Whatever the reason, have one that motivates you to fight.
- **Journal:**  
Success breeds success! Keep track of those successes and refer back to them during hard days!
- **Exercise:**  
Fighting OCD is exhausting. It makes you tired and you are often out of energy. Exercise will actually keep your mind and body focused. Keep mini weekly or monthly goals for yourself and it will keep you wanting to move!
- **Be Flexible:**  
Be prepared to change course at any time. Rigid thinking just leads to frustration!

### Ways to Stay Motivated Continued

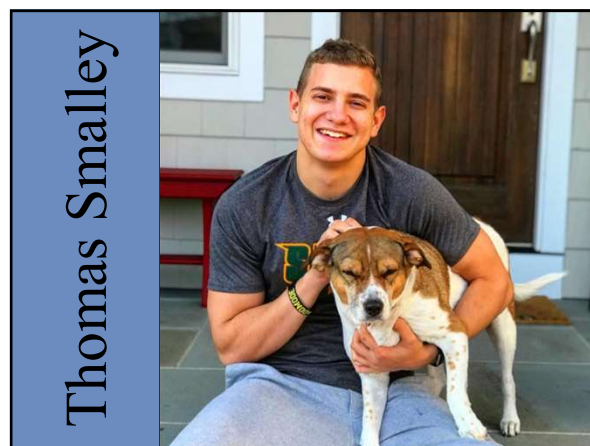
- **Rewards:**  
Find activities you enjoy and reward yourself with them after exposure work!
- **Make Your Exposures Around Your Goals:**  
If you need to write an important essay for school - and you're struggling with writing because of your perfectionism - make working on your essay part of your exposure work. This will help you to see the purpose for your exposures.
- **Prepare For Tough Days:**  
Expect moments where you will lack motivation and prepare for what you will do when those times come. It can be refocusing on your values, taking a break, pushing through with support, etc.
- **Support Groups:**  
Both online support groups (or even Facebook OCD groups) and in-person support groups in your area can be a way to stay motivated and gain accountability from a support system!
- **Vision Board:**  
Hang it over your bed or somewhere you will see it daily. Remind yourself why you are doing the hard work and why it is important to stay on track!






Things Lost To OCD	Original Reason for Entering Treatment	Ways Treatment Helps

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### Identifying Treatment Interfering Behaviors (TIBs)

**What are TIBs?** A TIB is any behavior that is incompatible or directly interferes with a person's ability to participate in treatment successfully. TIBs are important to address, because the can prevent people from receiving treatment. TIBs are primarily defined by a person's behavior (not a TIB, not a TIB, not a TIB). For example, a person not engaging in daily exposure exercises, because they are caring for a sick parent, does not have the capacity of disrupting treatment. However, the behavior is still a TIB, and it is important to address. Some reasons may be useful to identify for the purposes of disrupting TIBs. It is important to identify a TIB, identifying the behavior is the most important step.

**Instructions:** If you are having any difficulty with your recovery program, please check any of the items below that may apply.

**Exposure Issues:**

- Not engaging in daily exposures.
  - I make one too many.
  - I don't want to have time.
  - I don't want to take the risk.
  - Other \_\_\_\_\_
- Lying to helpers about your doing exposures or any aspect of treatment.
  - Other \_\_\_\_\_

**Response Prevention Issues:**

- Not using response prevention.
  - I forget the technique.
  - I don't want to take the risk.
  - Other \_\_\_\_\_
- Rationalizing following exposures.
  - I believe in the risk.
  - I don't want to take the risk.
  - I don't want to take the risk until I'm sure.
  - Other \_\_\_\_\_

**Script Issues:**

- Not following to scripts as often as possible.
  - I don't want to take the risk.
  - I don't want to take the risk.
  - Other \_\_\_\_\_
- Not writing or following to scripts at all.
  - I don't have an idea of what to write.
  - I don't want to take the risk.
  - I don't want to take the risk until I'm sure.
  - Other \_\_\_\_\_

**Treatment Preparation Issues:**

- Not being prepared to assist in disrupting treatment.
  - I don't think they are necessary.
  - I don't think they are necessary.
  - Other \_\_\_\_\_

Adapted from Pincus, A. (2000). Treatment readiness, motivation, and resistance. In M. H. Antoni & P. M. Pincus (Eds.), *Handbook of psychological treatment of OCD* (pp. 101-110). Washington, D.C.: APA Books. This appears in From: *Practical Obsessive Compulsive Disorder: A Personalized Recovery Program for Long-term Remission* by Jonathan Grayson. Preprint. Putnam: NYC, NY, 2014.

### Identifying Treatment Interfering Behavior Worksheet - Revised

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Form Completed By: \_\_\_\_\_ Date: \_\_\_\_\_

**What is a TIB?** A treatment-interfering behavior, or TIB, is any behavior that is incompatible or directly interferes with a person's ability to participate in treatment successfully. This behavior is important to address because it can prevent people from receiving treatment. A TIB is not defined by a person's intention, but by the outcome of the behavior. For example, a patient who misses therapy sessions to take care of an ill family member is not trying to disrupt therapy, but the outcome of the behavior interferes with treatment – in other words, the patient does not receive the care needed for recovery. For this reason, the pattern of missing sessions would be considered a TIB, no matter who it happens. Also, a TIB is not an isolated event. Typically, it is an ongoing pattern of behavior. Missing one session is probably not a TIB, but missing several sessions would be considered a TIB.

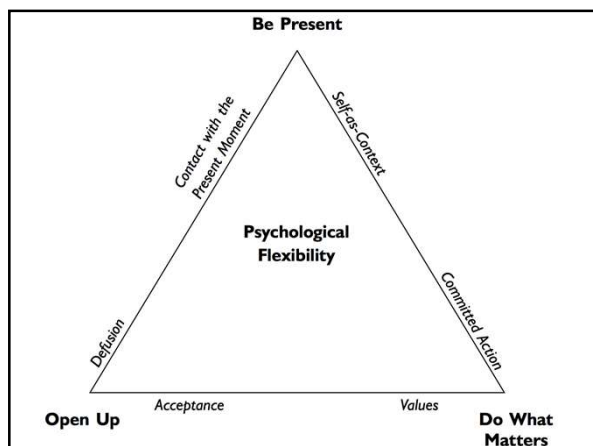
**Instructions:** Please check each TIB below that has been exhibited repeatedly by this patient. If you check more than one TIB, circle the number of the one you feel should be addressed first.

- Does not acknowledge having a problem.
- Does not adequately or consistently acknowledge the problem's severity or its impact on others.
- Does not identify clear, useful goals for treatment.
- When discussing the nature of the problem or the treatment plan, disagrees with the treatment team, dismisses the things they say, or lectures them.
- Attempts to change the focus of sessions to issues not on the treatment plan.
- Has difficulty explaining the treatment plan or the rationale behind it.
- Has difficulty answering questions in a timely fashion (e.g., provides information not relevant to the question, provides too much detail, does not respond).
- Asks questions that have already been asked or that cannot be answered.
- Expresses emotions in a way (e.g., crying, yelling) that stops treatment.
- Is frequently late or does not show up for treatment sessions.
- Has difficulty following the treatment plan (e.g., doesn't complete therapy assignments, doesn't take medication as prescribed) when:
  - \_\_\_\_\_ accompanied by staff \_\_\_\_\_ not accompanied by staff.
- Provides information to the treatment team that is inaccurate, misleading, irrelevant, repetitive, or inconsistent (e.g., does not adequately report difficulties, reports different things to different staff members, leaves out critical details).
- Engages in, threatens to engage in, or hints at engaging in self-destructive acts.
- Speaks or acts in a way that makes other patients or members of the treatment team feel physically threatened.
- Other: \_\_\_\_\_

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### Six psychological processes targeted by ACT:

- Acceptance
- Defusion
- Values
- Committed Action
- Self as Context
- Contact with the Present Moment



Short Term Goals	Value Identification	T.I.B.'s



### Making Exposures Fun

- Find Ways To Make The Exposures More Manageable:
  - Real-life exposures
  - Rewards
  - Pick a theme- (ex. for me sports or for a 12-year-old client it was Batman missions)
- Examples:
  - Contamination- Picking your favorite food and allowing yourself to eat that food as long as you do not wash your hands (ex. client with See's chocolate)
  - Pedophilia OCD- Dressing up as Spiderman to pass out toys to kids in foster care or dressing up as Santa Claus for Christmas and having kids sit on your lap to say what they want for Christmas
  - Sexual obsessions- Sexual intrusive thoughts about family members so it was 2 points for triggering family members and 1 for those who were not. Use those points to earn a reward
  - Harm OCD- Fear of harming dogs so volunteered at an animal shelter
  - Homosexuality OCD- Attended a Gay & Straight Alliance meeting at her high school

