



Violent and Sexual Obsessions

What do we mean by violent and sexual obsessions?

Obsessions in this category can include:

- Thoughts of killing or injuring others or oneself on purpose (not through negligence).
- Thoughts about acting in unacceptable sexual ways toward others.

It should be noted that people who suffer from these thoughts never act them out. Sufferers often wrongly believe that they may be potential criminals, perverts, or insane, and that no one else could think as they do. They ask themselves, "What kind of person am I that could think such thoughts? Why would I think these things if I didn't really want to do them?"

What are some typical symptoms of violent and sexual obsessions?

Violent thoughts may involve both mental images and what feel like impulses to act including:

- Thoughts of hitting, stabbing, strangling, mutilating or otherwise injuring their children, family members, strangers, pets, or even themselves.
- Ideas about using sharp or pointed objects, such as knives, forks, scissors, pencils, pens, broken bottles, letter openers, ice picks, power tools, or such things as poison, their bare hands, or even their cars to do themselves or others harm.
- Urges or impulses to push or throw themselves or others into the paths of trains or cars, out of windows, or off balconies, buildings, or other high places.
- Urges or impulses to hit pedestrians, ram their cars into bridge abutments on highways, or steer into oncoming traffic.

Sufferers often fear being alone with anyone smaller and weaker they could easily overpower, such as children, disabled, or elderly people, and often avoid going to such places as train platforms, or crowded street corners or public places. Parents may have thoughts of acting violently towards their own children.

Sexual thoughts in this category usually involve such things as:

- Raping or sexually abusing children (one's own or strangers'), other adults, or even animals.
- Fears of acting out other sexually inappropriate behaviors such as exposing oneself, touching others, or making inappropriate sexual remarks.

What impact do these thoughts have on sufferers' lives?

Suffering such doubts can result in anxiety and depression. Sufferers tend to avoid being around or alone with children or others who their thoughts are directed at. Some parents may even consider leaving their families.

Can violent and sexual obsessions be treated, and if so, how is this done?

There are effective treatments for OCD. It responds to a type of cognitive/behavioral therapy known as *Exposure and Response Prevention* (E&RP). It is based on getting sufferers to face their obsessive thoughts

while resisting their urges to do compulsions. Patients begin with easier assignments, and gradually work their way up to more difficult ones in a step-by-step way. Sufferers can be exposed to violent thoughts in a number of ways. These may involve assignments done under a therapist's care, or on one's own, via homework.

Assignments do not reassure, are tailored to each person's symptoms, and are designed to bring on anxiety by confronting the idea that the thoughts are true, that the feared consequences will happen, and that they can't be prevented. Assignments are based on a fear scale that rates all of the person's feared thoughts and situations in terms of the strength of the anxiety they cause. Therapy begins with those items lowest on the fear scale, and gradually works its way up, going at the patient's own pace. No one is ever forced to do anything they are not ready to do. If an assignment cannot be done in a whole step, it may be broken down into smaller steps.

How can I help a friend or family member with violent or sexual obsessions?

- Encourage them to get professional help as soon as possible
- If they are uncertain, you can help them to obtain information about treatment from expert sources. This might include downloading information from a reputable website (such as the International OCD Foundation) or helping them to find one of the more highly recommended books on the subject
- Respect their right to go beyond this point at their own pace
- Resist becoming involved in reassuring them that they have not, or will not harm themselves or others

Can't people just be reassured their thoughts aren't true and that they would never harm anyone?

The answer is a definite 'no.' The doubt of OCD is so great that no amount of reassurance can ever help. People with OCD tend to not face the things they fear, and so they never learn the truth about them, or develop a tolerance to them. The best way to overcome fears is by confronting feared things and then learning the truth of what really happens.

How can I have a conversation with a friend or family member who is ready to talk about these thoughts?

This should be done carefully and with sensitivity. If you are going to bring up the subject, it helps to first learn about the disorder. People with OCD already have feelings of shame about their symptoms, and often fear being thought of as *crazy* by others. Try to listen without judging, and try to understand how difficult it can be for them. Encourage them to seek qualified help from someone who specializes in treating OCD, but also respect their right to not seek help should they choose.

Can medicine help reduce violent or sexual obsessions?

Medicine can help as part of a larger OCD treatment package. Research has shown that medicine together with therapy can produce better results than either one alone. Medicine can reduce the occurrence and believability of obsessive thoughts, making it easier for the sufferer to do therapy. Therapy can then reduce anxiety and eliminate compulsions. Those with milder OCD may be able to succeed without it, while those with moderate to severe symptoms may find it more necessary.

Author: Fred Penzel, Ph.D., Western Suffolk Psychological Services, Huntington, NY

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617.973.5801
<http://www.ocffoundation.org>