



# OCD CONFERENCE DENVER

# PROGRAM GUIDE

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# WELCOME TO THE 27<sup>TH</sup> ANNUAL OCD CONFERENCE

Hello Conference Attendees!!!

Three years ago, we all met in Austin, TX. After a foray into the virtual world, we are excited to welcome you back to the 27th Annual OCD Conference in Denver, CO. By attending this Conference, you are already involved in increasing awareness, empowering research, and reducing the stigma associated with OCD and related disorders. We thank you for braving the uncertainty and for daring to care.

You have the opportunity to spend time with the world's foremost research scientists, exceptional clinicians who treat clients every day (and a lot more than usual these days!), and individuals with OCD and their families. What inspires me personally to return to the Conference each year are the friends my daughter and I made from around the country. And even more so this year after our imposed exile.

One of the unique things about this Conference is the experience of having so many diverse groups mingling, all of whom help each other find hope and support for OCD. Our researchers will share their latest discoveries about the causes and treatment of OCD. They value the opportunity to hear from the front lines about what is occurring in the community of OCD sufferers. Parents meet each other and form lifelong friendships. Kids and adults with OCD learn that they are not alone. We have so many interesting and committed providers and exhibitors, like our Title Sponsor the Neurobehavioral Institute, attending this year's Conference. Everyone is willing to answer questions, provide information, make friends, and share hope. We wish you experience kindness and inspiration at our Annual OCD Conference.

Our dedicated staff in Boston started planning this year's Conference over a year ago, supported by our outstanding Scientific and Clinical Advisory Board and the Conference Planning Committee. They put their heart into making this event novel, unique, informative, and welcoming. Please stop by and meet them! Ask them what they do and why they love doing it. You will find a warm-hearted group of powerfully motivated individuals. The IOCDF staff and other members of the IOCDF Board of Directors and IOCDF Advocates will be at the IOCDF Information and Welcome Booth throughout the weekend. Introduce yourself to one of us — we want to help! Ask us what seminar you may want to attend next or what steps you could take to help yourself or a family member.

With so much going on at the Conference, we'd like to touch on a few "can't-miss" programs:

- **Keynote Address:** We never truly experience anything in isolation — including OCD. Family members, though perhaps not the ones diagnosed with OCD, often have their own intimate journeys with the disorder, playing a significant role in a loved one's treatment. This is a story that rings true for so many in our community, especially when you are a teenager diagnosed with OCD. Family support is vital in navigating OCD while meeting all the challenges adolescence brings. This year, our Keynote speakers are the Kinberg family. A teen, sibling, and parents will all talk about the unique impact that growing up in a high-profile family can have on one's OCD treatment journey at a young age.
- **Youth Programming:** Near to my heart are our individualized tracks for elementary-aged kids, middle schoolers, and high schoolers where you will find full-day programs designed for kids and siblings with anxiety and OCD. Learn tools to take back your life and maybe even meet a friend who will understand you like no other. Learn more on page 27.
- In addition, there will be support groups on Thursday and Friday nights, a fun night of socializing at the OCD Conference Party on Saturday night, and so much more!

I wish I could tell you about each and every seminar because there are so many fantastic topics! Read through this Program Guide, use the Conference mobile app, ask us questions, and have fun! OCD tries to take from our lives — this Conference is about taking our lives back. Thanks for being such a vital part of this community. By coming to the Annual OCD Conference, you are now a part of changing the lives of those who suffer from OCD. Welcome to history, and welcome to hope!

All the best,  
Susan Boaz



President, Board of Directors,  
International OCD Foundation  
and mother of a Young Adult





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- Keynote .....
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Download the FREE mobile app for the 27th Annual OCD Conference to have all Conference information in the palm of your hand. The app allows you to create a personal schedule of sessions you're planning to attend and sends push notifications to ensure you don't miss a thing!!





## MISSION STATEMENT

The mission of the International OCD Foundation (IOCDF) is to help everyone impacted by obsessive compulsive disorder (OCD) and related disorders live full and productive lives. Our aim is to increase access to effective treatment, end stigma associated with mental health issues, and foster a supportive community for individuals with lived experience, their supporters, and mental health professionals.

## SUPPORTING THE IOCDF

As a 501(c)(3) public charity, the IOCDF relies on the generosity of individual donors to fulfill our mission. Below are some ways you can support our work to help people with OCD and related disorders:

- **Annual Fund | [iocdf.org/donate](https://iocdf.org/donate)**  
Supports programs that educate, raise awareness, and improve access to resources.
- **Research Grant Fund | [iocdf.org/donate-research](https://iocdf.org/donate-research)**  
Supports researchers who study OCD and related disorders to better understand causes and improve treatment outcomes.
- **Conference Scholarship Fund | [iocdf.org/conference-scholarship-fund](https://iocdf.org/conference-scholarship-fund)**  
Provides financial support to people who would otherwise be unable to attend the Annual OCD Conference.
- **Behavior Therapy Training Institute (BTTI) Scholarship Fund | [iocdf.org/btti-scholarship-fund](https://iocdf.org/btti-scholarship-fund)**  
Provides scholarships for therapists to attend in-depth, three-day intensive training courses on effective OCD treatment.

**Make your donation online, over the phone by calling (617) 973-5801 (Monday–Friday, 9am–5pm ET), or send a check to: IOCDF, P.O. Box 961029, Boston, MA 02196.**

## IOCDF BOARD OF DIRECTORS

**Susan Boaz**, President  
**David Calusdian**, Vice President  
**Ron Prevost**, Treasurer  
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**Jo-Ann Winston**  
**Jenny C. Yip, PsyD, ABPP**

**Denis Asselin, Emeritus**  
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**Patricia Perkins, JD, Emeritus**

## IOCDF STAFF

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Executive Director  
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Director of Media & Technology  
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Research Communications Specialist  
**Ming Li**  
Operations Specialist  
**Julie Oliver**  
Events Coordinator  
**Molly Nysten**  
Development Coordinator

# HOW WE HELP

Thanks to the patronage and generosity of our donors, the IOCDF is able to provide support, education, and resources for those affected by OCD and related disorders, as well as for the professionals who treat them.

## PROMOTING AWARENESS AND ADVOCACY

### One Million Steps for OCD Walk | [iocdf.org/walk](https://iocdf.org/walk)

An annual grassroots event that brings together the OCD and related disorders community to challenge stigma, raise funds, and create awareness about what it really means to have obsessive compulsive disorder. The OCD Walk was first held in Boston in 2013 and presently takes place in more than 30 communities across America, thanks to our IOCDF Affiliates.

### Annual OCD Conference | [iocdf.org/ocdcon](https://iocdf.org/ocdcon)

The largest international event focused on OCD and related disorders. #OCDCon brings together individuals with lived experience, their loved ones, mental health professionals, and researchers to nurture community, empower those impacted by OCD, and provide education about the latest treatments and findings.

### Online Conference Series | [iocdf.org/conferences](https://iocdf.org/conferences)

The IOCDF hosts several virtual conferences throughout the year, including an Online OCD Camp for youth and families, Conferencia de TOC Online for Spanish-speaking community members, and events for faith and hoarding disorder communities.

### OCD Awareness Week | [iocdf.org/ocdweek](https://iocdf.org/ocdweek)

This special week exists to spread knowledge about #RealOCD and reduce stigma associated with obsessive compulsive and related disorders. Each year during the 2nd full week in October, the IOCDF and our Advocates provide a number of ways to get involved — from special events and community activities, to livestreams and more. We invite you to celebrate with us this October 10–16, 2022!

### Public Policy Advocacy Program | [iocdf.org/public-policy](https://iocdf.org/public-policy)

Connects our community to policy makers in Washington and beyond, with the goal of making our voices heard when important decisions are made. We offer the IOCDF Action Center where members of our community can contact their elected representation directly about legislation of key interest to the OCD and related disorders community.

### IOCDF Advocate Program | [iocdf.org/advocates](https://iocdf.org/advocates)

The IOCDF Advocate Program is a volunteer grassroots effort designed to empower those in the community to raise awareness and educate the public about OCD and related disorders. Led by National Advocates Ethan Smith and Dr. Liz McIngvale, the IOCDF Advocates lead the community in various advocacy projects, such as our OCD Awareness Week initiatives, awareness-raising PSAs, inspirational social media content, and much more.

## PROVIDING RESOURCES AND SUPPORT

### IOCDF Resource Directory | [iocdf.org/find-help](https://iocdf.org/find-help)

A free international, comprehensive database of treatment providers, clinics, and programs specializing in OCD and related disorders, searchable by location as well as by state for teletherapy options. The directory also includes OCD support groups for individuals and family members.

### Peace of Mind Virtual Community | [iocdf.org/peaceofmind](https://iocdf.org/peaceofmind)

Weekly virtual livestream programming covering a variety of OCD and related disorders topics, hosted by our very own IOCDF Advocates. Connect with community members the world over; learn more about OCD subtypes, treatment, and research; and ask questions of expert providers.

### IOCDF Affiliates | [iocdf.org/affiliates](https://iocdf.org/affiliates)

Our 30 nationwide Affiliates carry out the mission of the IOCDF at the state level. IOCDF Affiliates hold conferences, participate in the OCD Walk, organize community meetups, and more! Visit the IOCDF website to find your local Affiliate or learn how to start an Affiliate in your area.

### OCD Newsletter | [iocdf.org/newsletter](https://iocdf.org/newsletter)

A quarterly newsletter that includes personal stories from the community as well as articles about the latest OCD therapy, research, and resources.

### IOCDF Websites | [iocdf.org](https://iocdf.org)

The IOCDF main website ([iocdf.org](https://iocdf.org)) is packed with expanded and updated information about OCD and related disorders, receiving more than 2 million visits each year. The IOCDF also maintains a suite of specialty websites:

- [OCDinKids.org](https://ocdinkids.org) – For parents and children, and the mental health and medical professionals who treat pediatric OCD.
- [HelpForHoarding.org](https://helpforhoarding.org) – For individuals and families impacted by hoarding disorder (HD), the mental health professionals who treat HD, and first responders.
- [HelpForBDD.org](https://helpforbdd.org) – For teens, young adults, adults, and family members impacted by body dysmorphic disorder (BDD), and mental health professionals who treat BDD.
- [AnxietyintheClassroom.org](https://anxietyintheclassroom.org) – For school personnel, students, and families dealing with anxiety and/or OCD in an education setting.
- [AnxietyinAthletes.org](https://anxietyinathletes.org) – For team staff, athletes, and families dealing with anxiety and/or OCD in sports and athletics.

## IMPROVING EDUCATION AND TREATMENT

### IOCDF Training Institute | [iocdf.org/training](https://iocdf.org/training)

We are committed to training more clinicians to effectively diagnose and treat OCD. Our Training Institute includes professional training opportunities, including our flagship Behavior Therapy Training Institute (BTTI), Pediatric BTTI, case consultation groups, and destination CE/CME opportunities.

### IOCDF Research Grant Program | [iocdf.org/research-grant-program](https://iocdf.org/research-grant-program)

Thanks to the generosity of donors, we have awarded more than \$9 million in grant funding to scientists investigating the causes and treatment of OCD and related disorders.

### IOCDF Pediatrician Partnership Program |

### [iocdf.org/pediatric-outreach-program](https://iocdf.org/pediatric-outreach-program)

Provides pediatricians with up-to-date knowledge to diagnose pediatric OCD and PANDAS/PANS, and to connect families with effective treatment. This is a companion outreach program to our Pediatric Behavior Therapy Training Institute (BTTI) for mental health professionals.

# ABOUT THE ANNUAL OCD CONFERENCE



The IOCDF's Annual OCD Conference is a unique event that gives experts, professionals, and the general community the chance to connect, learn, and empower each other. Attendees range from adults with OCD, children and teens with OCD, and their families and friends, to professionals who treat and researchers who investigate OCD. This inclusive attendee population makes for a uniquely supportive and dynamic experience, while making it challenging to develop one program or workshop that will address all of these groups at the same time. As a result, presentations are organized by track and difficulty level.

## Tracks

We have asked our presenters to target each of their presentations to a particular audience, though all talks remain open to all attendees. It is our hope that the information presented in these "targeted" talks will be more helpful and better tailored to the audience. These targeted audiences include:

- Individuals with OCD
- Parents and family members
- Elementary, Middle, & High Schoolers
- Young adults (ages 18–30)
- Therapists (including pre-licensed trainees and students)
- Researchers (including student/trainee researchers)

There is also an "Everyone" track for presentations that may not fit into the above categories.

## Difficulty Level

While all presentations are open to all attendees, the presentations are sorted into two difficulty levels to help better describe the material being presented: Introductory and Advanced. Speakers used the following guidelines to design their presentations:

- **Introductory:** A presentation intended for those who are new to the diagnosis and treatment of OCD and related disorders. Appropriate topics include defining commonly used terms, reviewing diagnostic criteria, and a general introduction and overview of the topic.
- **Advanced:** A presentation intended for attendees who are very experienced and knowledgeable about OCD and related disorders, their treatment, and relevant research. These talks usually include new treatment strategies, a clinical roundtable for treatment challenges, and/or strategies for working with comorbid diagnoses (in other words, an advanced talk should not include a review of diagnostic criteria or a description of first-line treatments).

## Specialty Series

Over the past few years, we have also introduced other specialized programming and presentation series. Again, the hope is that we are able to address the particular needs of some of our Conference attendees. Some highlights for 2022 include:

- **BDD:** This series began in 2014, and is geared towards all individuals affected by or working with body dysmorphic disorder (BDD).
- **Perinatal OCD:** This series is geared towards all individuals affected by or working with perinatal OCD.
- **Working with Diversity:** This series is geared towards clinicians who would like to improve their practice with diverse populations.
- **PANS/PANDAS:** This series is geared towards all individuals affected by or working with PANDAS/PANS.



## 27<sup>TH</sup> ANNUAL OCD CONFERENCE PLANNING COMMITTEE

The Annual OCD Conference program is created as a partnership between IOCDF staff and a Conference Planning Committee (CPC) that is made up of diverse stakeholders within the OCD community (individuals, family members, therapists, researchers, etc.). Together, the IOCDF and the CPC

review every submission and work together to set the final Conference programming. The CPC is organized into several subcommittees that map on to the Conference tracks and special topic series, with each subcommittee composed of the leaders and experts in the OCD community.

### Body Dysmorphic Disorder

Denis Asselin  
Scott Granet, LCSW  
Kathy Phillips, MD  
Robyn Stern, LCSW  
Chris Trondsen, AMFT, APCC

### Body-Focused Repetitive Behaviors

Nancy Keuthen, PhD  
Charles Mansueto, PhD  
Jen Monteleone, APR  
Jennifer Raikes

### Hoarding Disorder

Bec Belofsky-Shuer  
Christiana Bratiotis, PhD, LICSW  
Randy Frost, PhD  
Jordana Muroff, PhD, LICSW  
Anne Pegano, LCSW  
Karen Rowa, PhD  
Jennifer Sampson  
Lee Shuer  
Gail Steketee, PhD, LICSW  
Kiara Timpano, PhD

### Living with OCD & Everyone

Valerie Andrews

Caitlin Claggett Woods, PhD  
Stacey Conroy, LCSW, MPH  
Molly Fishback  
Darcy Howell  
Marni Jacob, PhD, ABPP  
Vinay Krishnan  
Elizabeth McIngvale, PhD, LCSW  
Ethan Smith  
Chris Trondsen, AMFT, APCC

### Parents & Families

Micah Howe  
Jason Niosi  
Lori Shah  
Carrie Smalley

### Research to Clinical Practice

Anthony Pinto, PhD  
Eric A. Storch, PhD  
Kiara Timpano, PhD

### Therapists

Kasey Brown, LCSW  
Jordan Cattie, PhD  
Jelani Daniel, LPC  
Marla Deibler, PsyD  
Ben Eckstein, LCSW

Shmuel Fischler, LCSW-C  
Michael Heady, LCPC  
Amy Mariaskin, PhD  
Kimberley Quinlan, LMFT  
Belinda Seiger, PhD, LCSW  
Michelle Witkin, PhD

### Young Adults

Meg Dailey  
Caroline K.  
Kyle King  
Alex Rosenberg  
Tommy Smalley

### Youth Programming

Chris Baier  
Susan Boaz  
Madeline Conover, LMHC, REAT  
Lisa Coyne, PhD  
Natasha Daniels, LCSW  
Denise Egan Stack, LMHC  
Darcy Howell  
Caroline K.  
Kyle King  
Amanda Petrik-Gardner, LCPC  
Kat Rossi, LMHC

## IOCDF RESEARCH SYMPOSIUM PLANNING COMMITTEE

**Co-Chair:** Christopher Pittenger, MD, PhD

*Associate Professor of Psychiatry, Yale University; Director, Yale OCD Research Clinic; Scientific and Clinical Advisory Board Member, International OCD Foundation*

**Co-Chair:** Emily Stern, PhD

*Associate Professor of Psychiatry, New York University Grossman School of Medicine*

Bunmi Olatunji, PhD

*Associate Professor of Psychiatry, Director of Clinical Training, Vanderbilt University; Scientific and Clinical Advisory Board Member, International OCD Foundation*

Brad Riemann, PhD

*Chief Clinical Officer, Chief Operating Officer, Rogers Behavioral Health; Scientific and Clinical Advisory Board Member, International OCD Foundation*

Sanjaya Saxena, MD

*Psychiatrist, Rogers Behavioral Health-San Diego; Clinical Professor, University of California, San Diego Department of Psychiatry; Scientific and Clinical Advisory Board Member, International OCD Foundation*

H. Blair Simpson, MD, PhD

*Director of the Anxiety Disorders Clinic, the Center for Obsessive Compulsive and Related Disorders, and Professor of Psychiatry, Columbia University; Scientific and Clinical Advisory Board, International OCD Foundation*

Eric A. Storch, PhD

*Vice Chair and Head of Psychology, Professor, Baylor College of Medicine; Scientific and Clinical Advisory Board Member, International OCD Foundation*

Kiara Timpano, PhD

*Professor of Psychology, University of Miami; Director, Program for Anxiety, Stress, and OCD (PASO), University of Miami; Scientific and Clinical Advisory Board Member, International OCD Foundation*

# CONTINUING EDUCATION

Professionals who register for and attend the Conference at the Clinician/Therapist Level will be eligible to receive 18 Continuing Education (CE) credits. CE credits are offered for approved sessions denoted as "CE Talks" only. Registrants must attend in full to receive credit and must sign in and out at the continuing education desk each day. Psychologists must check in and out of each session.

Learning objectives can also be viewed at [iocdf.org/DenverCE](https://iocdf.org/DenverCE)

## Accreditation Statement

In support of improving patient care, this activity has been planned and implemented by Amedco LLC and the International OCD Foundation. Amedco LLC is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC) to provide continuing education for the healthcare team.



## Physicians (ACCME) Credit Designation

Amedco LLC designates this live activity for a maximum of 18.00 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Check whether your state qualifies for CE credit at [iocdf.org/DenverCE](https://iocdf.org/DenverCE)

## Social Workers (ASWB) Credit Designation

As a Jointly Accredited Organization, Amedco LLC is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. State and provincial regulatory boards have the final authority to determine whether an individual course may be accepted for continuing education credit. Amedco maintains responsibility for this course. Social Workers completing this course receive 18.00 GENERAL continuing education credits.



Check whether your state qualifies for CE credit at [iocdf.org/DenverCE](https://iocdf.org/DenverCE)

## Psychologists (APA) Credit Designation



This course is co-sponsored by Amedco and the International OCD Foundation. Amedco is approved by the American Psychological Association to sponsor continuing education for psychologists. Amedco maintains responsibility for this program and its content. 18.00 hours.

Check whether your state qualifies for CE credit at [iocdf.org/DenverCE](https://iocdf.org/DenverCE)

## Counselors/LMFTS (NBCC) Credit Designation



This program is sponsored by the International OCD Foundation (IOCDF), Inc for 18 continuing education credits. This program has been approved by NBCC for NBCC Credit. The IOCDF is solely responsible for all aspects of the program (NBCC Approval #SP-2490).

Check whether your state qualifies for CE credit at [iocdf.org/DenverCE](https://iocdf.org/DenverCE)

Visit [iocdf.org/DenverCE](https://iocdf.org/DenverCE) for more information. For questions about continuing education (CE) credit for psychologists, physicians, nurses, counselors, and social workers go to the Continuing Education desk at the Centennial third floor lobby, next to the registration desks.

To view all speaker disclosures of relevant financial relationships, please go to [iocdf.org/DenverCE](https://iocdf.org/DenverCE) or scan the QR code below.

Professional attendees who have signed in and out at the conference will receive an email on Sunday, July 10, 2022 from the IOCDF with instructions on how to claim their continuing education credits.



Scan for all CE details

A panoramic view of San Francisco at sunset. The sky is a mix of orange, pink, and purple. In the foreground, a street lined with colorful Victorian houses leads towards the city. In the background, the San Francisco skyline is visible, with the Transamerica Pyramid being the most prominent building. The lights of the buildings are starting to glow.

**2023** San

**Francisco**

**ANNUAL OCD CONFERENCE**

**JULY 6-9, 2023**  
**SAN FRANCISCO MARRIOTT MARQUIS**

# CONFERENCE SPONSORS

Sponsors help underwrite the cost of the Annual OCD Conference, enabling us to provide the best programming and events at an affordable price. Make sure to stop by our sponsors' exhibit booths in the Capital Foyer on the Fourth Floor (see page 14 for booth numbers).

## TITLE SPONSOR



NEUROBEHAVIORAL INSTITUTE

**NBI**



**NBI RANCH**

## PLATINUM SPONSORS



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Behavioral Health

# CONFERENCE SPONSORS

## SAPPHIRE



## GOLD



## SILVER



## BRONZE



# CONFERENCE HOTEL AND DENVER INFO

Welcome to the Mile High City! Denver, CO, is known for its Rocky Mountains, world-class cultural attractions, innovative craft breweries, chef-driven dining, and new-age music scene. The Hyatt Regency Denver at Colorado Convention Center offers a stylish stay in downtown Denver with access to the 27th-floor Peaks Lounge — the highest-riding lounge in the city with spectacular Rocky Mountain views. Dozens of attractions will be steps away from the Conference, including:

- **16th Street Mall:** A mile-long pedestrian promenade in the heart of downtown just two blocks from the Hyatt Regency Denver at Colorado Convention Center.
- **Larimer Square:** An iconic, lively, and pedestrian-friendly gathering place and the beating heart and creative soul of downtown Denver
- A variety of **museums**, including the Denver Art Museum, the Buffalo Bill Museum and Grave, and the Colorado Railroad Museum
- **LoDo Historic District** (short for Lower Downtown), a 29-block section of trendy bars, restaurants, and shops with preserved buildings from the city's original settlement

All Conference activities will be taking place at the Hyatt Regency Denver at Colorado Convention Center, with the exception of our off-site events, and overflow sessions across the street at the convention center (with the Big Blue Bear!). Everything will be noted in the program guide and mobile app.

## Prayer Room and Breastfeeding Space

The IOCDF has a prayer room and breastfeeding room set aside for the privacy of our attendees. Please see an IOCDF staff member at the in the Centennial Foyer on the Third Floor during registration hours in order to gain access.

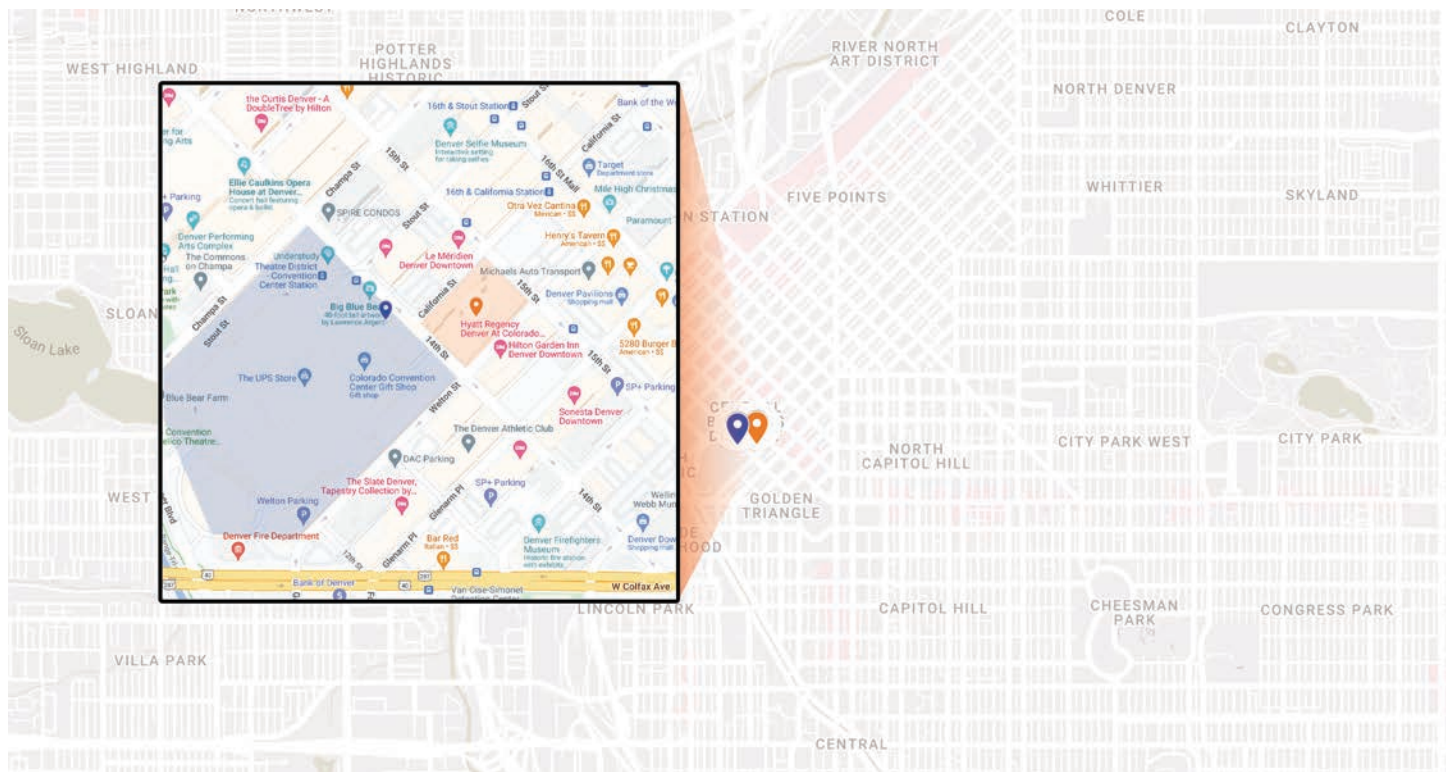


## Conference Wi-Fi

Complimentary Wi-Fi is provided to all attendees throughout the weekend thanks so our sponsor, Biohaven Pharmaceuticals.

**Network Name:** Biohaven provided OCDcon Wi-Fi

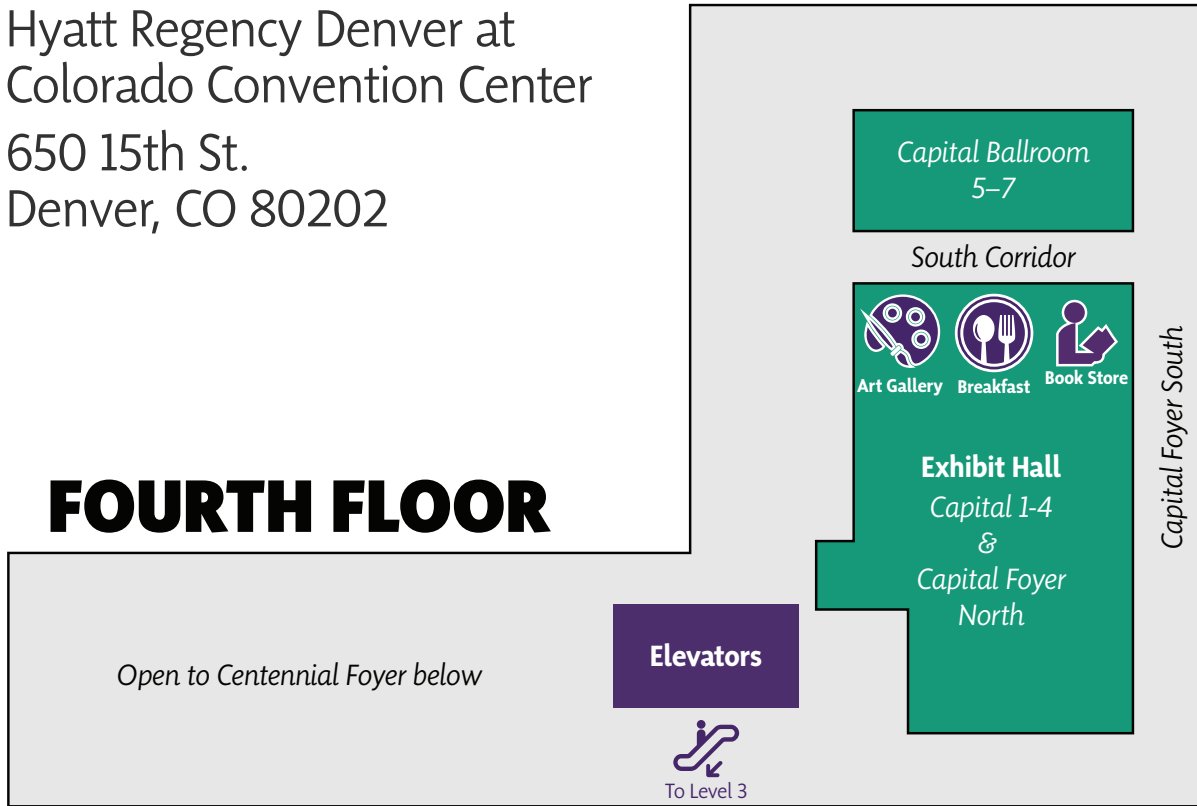
**Password:** ocd2022



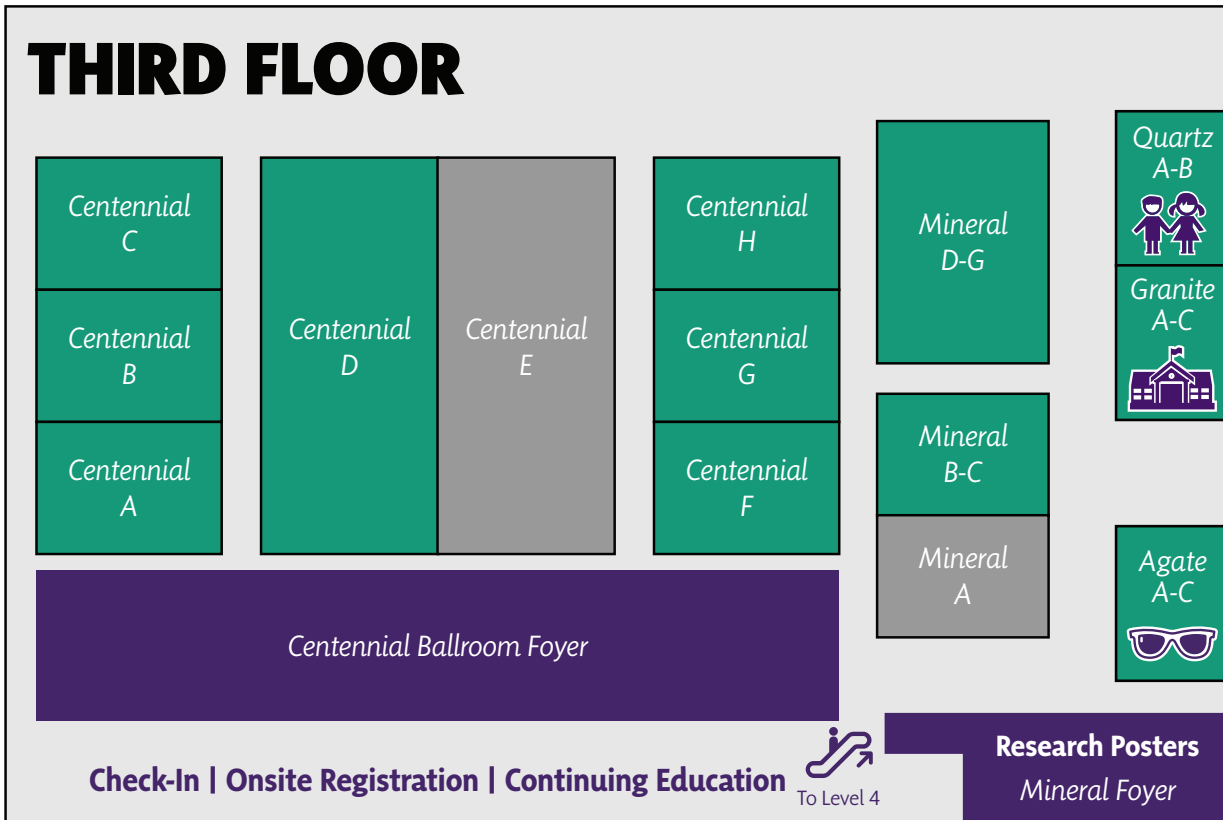
# CONFERENCE HOTEL MAP

Hyatt Regency Denver at  
Colorado Convention Center  
650 15th St.  
Denver, CO 80202

## FOURTH FLOOR



## THIRD FLOOR



# IOCDF INFORMATION AND WELCOME BOOTH

## IOCDF Information Booth

Exhibit Hall, Capital Foyer,  
Fourth Floor

This is the place for new and returning attendees to find out how to deepen engagement with the IOCDF, get more information on our programs, and pick up swag! Swing by to say “hello” to IOCDF Staff and grab info about:



- How to best navigate the Conference
- How to get more involved in future Conferences (e.g., become a volunteer, submit a proposal to be a speaker next year!)
- Becoming a Grassroots Advocate
- How to get involved in fundraising for the IOCDF, including the One Million Steps for OCD Walk
- Training Institute opportunities for therapists/clinicians
- Learn more about our Anxiety in the Classroom program and how you might get involved.
- How to submit OCD Newsletter and/or blog contributions
- How to make a video for us to post on one of our websites
- Learn more about our Research Grant program

## Stuck in your Room?

### **Let the Annual OCD Conference Room Brigade Help**

You've made it to the Conference. It may have been really hard for you to get here, but you made it. What happens if you get triggered and your OCD symptoms rear their ugly head, making it difficult for you to leave your room?

If you find yourself stuck in your hotel room, or if you are the friend or family member of someone stuck, contact the Room Brigade at (617) 910-0623 and leave a voicemail with your name, contact number, and hotel room number. The Room Brigade will respond to all voicemails within 2 hours of receipt. These volunteers will talk on the phone, stand outside a hotel room door, or come into your room (all volunteers will be in pairs with a male and female) — whatever works best for you in your goal to get out of your room and into the Conference. You've already made it here — now let us help you get the most out of your Conference experience.

*PLEASE NOTE: The Room Brigade is not a crisis hotline or an emergency service. The assistance provided by the Room Brigade is intended to be supportive only, and is not considered to be therapeutic. **If you are in crisis or are worried you might hurt yourself or someone else, please call the National Suicide Prevention Lifeline at 1-800-273-8255.***



# OCD CONFERENCE BOOKSTORE

## BOOKSTORE HOURS:

Friday, July 8 7:00am–5:30pm  
Saturday, July 9 7:00am–7:00pm  
Sunday, July 10 7:00am–11:30am

*Located in the back right of the Exhibit Hall  
Capital Ballroom 1–4 on the Fourth Floor*



## MEET THE AUTHORS

The following authors will be available to sign their books and briefly answer questions at the OCD Conference Bookstore:

*Bookstore managed by*

 newharbingerpublications

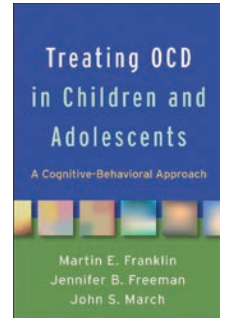
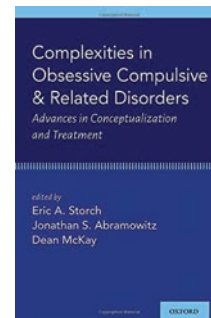
## FRIDAY, JULY 8

11:15am–12:30pm (lunch break)

**Carolyn Rodriguez, MD, PhD and Randy Frost, PhD**  
*Hoarding Disorder: A Comprehensive Clinical Guide*

**Eric A. Storch, PhD and Jonathan Abramowitz, PhD**  
*Complexities in Obsessive Compulsive and Related Disorders*

**Martin Franklin, PhD and John March, MD, MPH**  
*Treating OCD in Children & Adolescents: A Cognitive-Behavioral Approach*



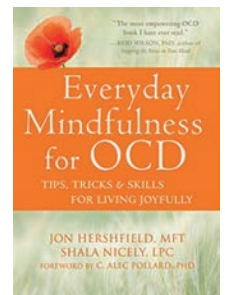
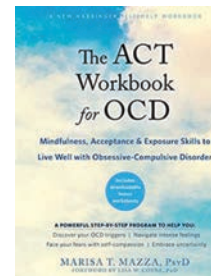
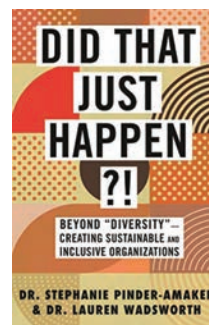
## SATURDAY, JULY 9

11:15am–12:30pm (lunch break)

**Stephanie Pinder-Amaker, PhD and Lauren Wadsworth, PhD**  
*Did That Just Happen?!: Beyond "Diversity"*

**Marisa T. Mazza, PsyD**  
*The ACT Workbook for OCD*

**Jon Hershfield, LCMFT**  
*Everyday Mindfulness for OCD, The OCD Workbook for Teens, When a Family Member Has OCD*



# EXHIBIT HALL

Capital Ballroom 1–4 and Foyer, Fourth Floor

Our exhibitors help to make the Annual OCD Conference possible year over year. They range from treatment facilities, to research institutions, to fellow independent charity organizations — and they are all looking to help connect the Conference population to the various services and resources they have to offer the OCD and related disorders community.

**Friday, July 8**

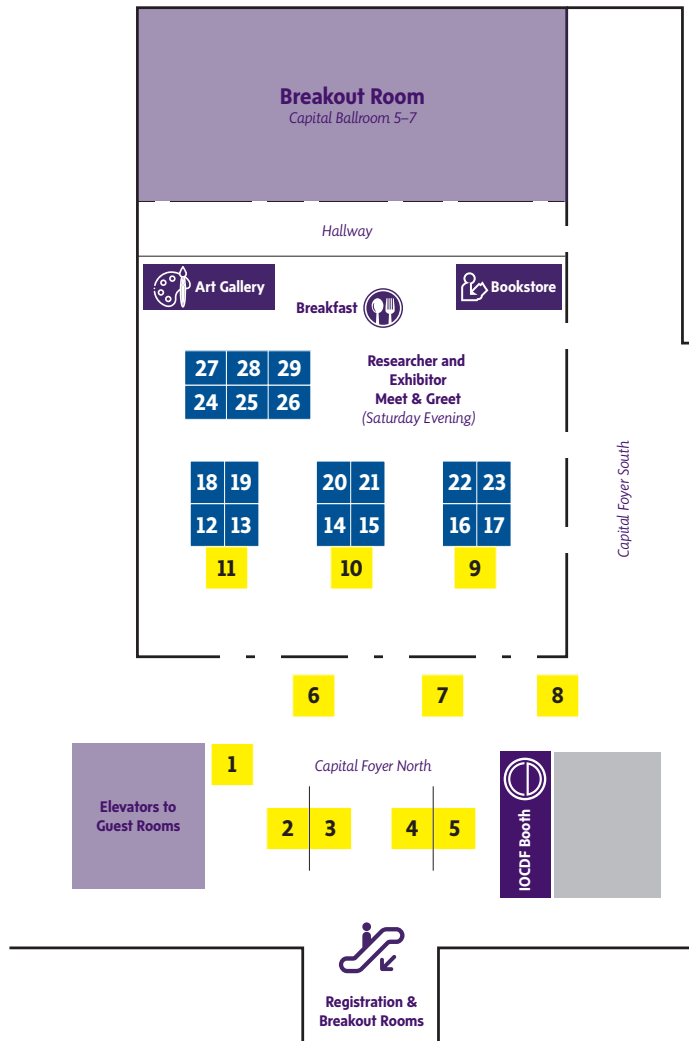
**7:00am–5:30pm**

**Saturday, July 9**

**7:00am–7:00pm**

**Sunday, July 10**

**7:00am–11:30am**



The Exhibit Hall is where **breakfast** will take place all three days of the Conference and be where you'll find the return of the **Conversation Cafe!** Tables will be assigned specific themes and topics like "Young Adult" or "BIPOC" to help attendees connect with similar experiences and meet new people.

The Exhibit Hall is also the venue for the **Researcher and Exhibitor Meet & Greet**, sponsored by Pathlight Mood & Anxiety Center, taking place immediately following the Awards Presentation & Keynote Address on Saturday, July 9 from 5:45pm–7:00pm. This event will not only allow for networking with all our exhibiting organizations, but is an opportunity for attendees to meet the leaders in OCD and related disorders research and learn about the most recent findings presented by their displayed research posters. See page 47 for more information.

Take a stroll through the Exhibit Hall and get to know some of our community's artists! The **OCD Art Gallery**, sponsored by Hopewell, will feature artwork submitted by members of the OCD community, from prints to paintings to mixed media, and more.



## EXHIBITORS AND BOOTH NUMBERS (see descriptions on pages 15-18)

- |    |  |       |  |
|----|--|-------|--|
| 1  | Biohaven Pharmaceuticals               | 16    | Stanford University Brain Stimulation Lab                                |
| 2  | McLean OCD Institute                   | 17    | Moleculera Labs  |
| 3  | Pathlight Mood and Anxiety Center      | 18    | The OCD and Anxiety Treatment Center                                     |
| 4  | Neurobehavioral Institute              | 19    | Renewed Freedom Center for Rapid Anxiety Relief                          |
| 5  | Rogers Behavioral Health               | 20    | the ocdopus  |
| 6  | Anxiety Institute                      | 21    | Anxiety Sisters LLC  |
| 7  | NW Anxiety Institute                   | 22    | PANDAS Physicians Network  |
| 8  | NOCD                                   | 23    | Child Mind Institute   |
| 9  | CBTeam                                 | 24    | Baylor College of Medicine   |
| 10 | Hopewell                               | 25    | BrainsWay  |
| 11 | Sheppard Pratt                         | 26    | University of Colorado Anschutz Medical Campus, Department of Psychiatry |
| 12 | Equinox Counseling & Wellness Center   | 27&28 | IOCDF Affiliates   |
| 13 | New England Center for OCD and Anxiety | 29    | NeuroStar  |
| 14 | Lindner Center of HOPE                 |       |  |
| 15 | JACK Mental Health Advocacy            |       |  |

# EXHIBITORS

## Title Sponsor

NEUROBEHAVIORAL INSTITUTE  
(BOOTH 4)

2233 N Commerce Pkwy  
Ste 3

Weston, FL 33326

(954) 217-1757

[info@nbweston.com](mailto:info@nbweston.com)

[nbweston.com](http://nbweston.com)

Neurobehavioral Institute (NBI) specializes in intensive programs for complex OCD and anxiety-related disorders, across all age groups. While in treatment, those 18+ who need extra structure and support to make progress may elect to reside at NBI Ranch, our supportive living setting in Southwest Ranches, FL. NBI's comprehensive services include a step-down program, parent training, neuropsychological testing, executive function training, psychiatric liaison and nutritional guidance. Most treatment is directly provided by doctoral level clinicians. NBI is also a postdoctoral training center, accredited by APPIC. Evidence-supported treatment is conducted in English, Spanish, and Portuguese. In South Florida, NBI has offices in Weston and Coral Gables. Services are also available in New York City and Rio de Janeiro, Brazil.



## Platinum Sponsors

MCLEAN OCD INSTITUTE (BOOTH 2)

115 Mill St

Belmont, MA 2478

(877) 203-3232

[ocdiadmissions@partners.org](mailto:ocdiadmissions@partners.org)

[mcleanhospital.org/ocdi](http://mcleanhospital.org/ocdi)

McLean Hospital offers exceptional care for children and adults who are living with OCD, depression, and anxiety. A top rated hospital by U.S. News and World Report, McLean OCD Institute provides compassionate care using evidence-based treatment methods through short-term inpatient and diagnostically-specific residential day treatments, as well as intensive outpatient programs. McLean OCD Institute has expanded services in Houston, TX, to further meet the needs of children and adults who struggle with OCD and related disorders. Call today to learn how we can help!



ROGERS BEHAVIORAL HEALTH  
(BOOTH 5)

34700 Valley Rd

Oconomowoc, WI 53066

(800) 767-4411

[info@rogersbh.org](mailto:info@rogersbh.org)

[rogersbh.org](http://rogersbh.org)

Rogers Behavioral Health is a nationally recognized, not-for-profit provider of highly specialized psychiatric care, including evidence-based treatment for children, teens, and adults with OCD and related anxiety disorders. Backed by more than a century of experience, Rogers is leading the way on measurement-based care and use of clinical outcomes.



## Sapphire Sponsors

BIOHAVEN PHARMACEUTICALS (BOOTH 1)

215 Church St

New Haven, CT 6510

(203) 915-4988

[timothy.mccormack@biohavenpharma.com](mailto:timothy.mccormack@biohavenpharma.com)

[ocdtrial.org](http://ocdtrial.org)

Biohaven is a commercial-stage pharmaceutical company based in New Haven, CT. We are led by Dr. Vlad Coric, who was an OCD researcher and OCD treating physician at Yale University before joining the pharma industry and ultimately becoming the CEO of Biohaven. We are also a passionate group of dedicated individuals who come to work each day with a commitment to making a difference in the lives of patients.



PATHLIGHT MOOD AND ANXIETY CENTER  
(BOOTH 3)

7351 E. Lowry Blvd, Ste 200

Denver, CO 80230

(866) 222-5136

[info@ercpathlight.com](mailto:info@ercpathlight.com)

[pathlightbh.com](http://pathlightbh.com)

Pathlight Mood & Anxiety Center is part of a leading national mental health care system dedicated to treating mood, anxiety, and trauma-related disorders, including depression and mania, generalized anxiety disorder, obsessive-compulsive disorder, and PTSD. Pathlight's evidence-based approaches and specialty programming treats each patient as a whole and unique person, no matter how complex the diagnosis. We provide care for children, adolescents, and adults of all genders, races, and ethnicities. Levels of care include Residential, Partial Hospitalization (PHP), and in-person and virtual Intensive Outpatient (IOP). Pathlight has locations throughout the country, with headquarters located in Denver.



## Gold Sponsors

ANXIETY INSTITUTE (BOOTH 6)

75 Holly Hill Ln, Ste 300

Greenwich, CT 6830

(203) 489-0888

[admissions@anxietyinstitute.com](mailto:admissions@anxietyinstitute.com)

[anxietyinstitute.com](http://anxietyinstitute.com)

Anxiety Institute's Intensive Day Program is designed for clients ages 13 through 25 who struggle with moderate to severe OCD, anxiety, and related disorders. Our integrative program includes two hours of evidence-based individual cognitive and behavioral work daily, complemented by two hours of group work - for expedited and enduring recovery.



# EXHIBITORS

## NW ANXIETY INSTITUTE (BOOTH 7)

32 NE 11th Ave  
Portland, OR 97232  
(503) 542-7635

[info@nwanxiety.com](mailto:info@nwanxiety.com)  
[nwanxiety.com](http://nwanxiety.com)

NW Anxiety Institute and NW Anxiety Pediatrics are specialty outpatient clinics located in the heart of Portland, OR. We specialize in bringing evidence-based treatments to life, creatively engaging with individuals of all ages to face and overcome their fears.

We offer outpatient individual therapy, therapeutic groups, and intensive outpatient (IOP) treatment for children, teens, and adults with OCD or anxiety.

### Silver Sponsors

## HOPEWELL (BOOTH 10)

9637 State Route 534  
Middlefield, OH 44062  
(440) 426-2000

[Admissions@hopewell.cc](mailto:Admissions@hopewell.cc)  
[hopewellcommunity.org](http://hopewellcommunity.org)

Hopewell is a clinically-based therapeutic community set on a working 325-acre farm treating adults diagnosed with OCD and other mental illnesses. Evidence-based treatment practices and the holistic power of nature combine within a community atmosphere to heal residents and teach skills to manage the symptoms of their mental illness.



## NOCD (BOOTH 8)

225 N Michigan Ave, Ste 1430  
Chicago, IL 60601  
(312) 766-6780

[care@nocdhelp.com](mailto:care@nocdhelp.com)  
[treatmyocd.com](http://treatmyocd.com)

NOCD's mission is to create a world where anyone can access effective OCD treatment. Through the NOCD platform, members can do live video sessions with a licensed therapist specialized in Exposure and Response Prevention (ERP), the gold standard treatment, and receive support between sessions through self-help tools and peer communities.



### Bronze Sponsors

## BRAINSWAY (BOOTH 25)

1 Van de Graaff Dr  
Burlington, MA 1803  
(844) 386-7001

[DeepTMS@brainsway.com](mailto:DeepTMS@brainsway.com)  
[brainsway.com](http://brainsway.com)

BrainsWay, a global leader in advanced noninvasive neurostimulation treatments for mental health disorders, is boldly advancing neuroscience with its proprietary Deep Transcranial Magnetic Stimulation (Deep TMS) platform technology. We are the first and only TMS company to obtain three FDA-cleared indications demonstrating clinically proven efficacy. Indications include MDD, Anxious Depression, OCD, and Smoking Addiction. Additional clinical trials of Deep TMS in various psychiatric, neurological, and addiction disorders are underway.



## CBTEAM (BOOTH 9)

81 Hartwell Ave, Ste 310  
Lexington, MA 02421  
(617) 797-9387

[info@cbteam.org](mailto:info@cbteam.org)  
[cbteam.org](http://cbteam.org)

CBTeam is a behavioral health clinic specializing in the treatment of OCD and anxiety disorders across the lifespan. We are a team of clinicians who unite around our shared passion for evidence-based treatment, compassionate care, and values-based living. Ask about our expanding services and hiring opportunities!



## SHEPPARD PRATT (BOOTH 11)

6501 N. Charles St  
Baltimore, MD 21204  
(410) 938-5000

[Kelli.Lillard@sheppardpratt.org](mailto:Kelli.Lillard@sheppardpratt.org)  
[sheppardpratt.org](http://sheppardpratt.org)

We offer robust mental health, special education, co-occurring disorders, developmental disability, and social services throughout Maryland. Sheppard Pratt offers every level of care, from inpatient hospitals, to day programs, to residential care, to outpatient and in-home services, including several specialty services specifically for OCD and anxiety needs.



### EXHIBITING PARTNERS

## ANXIETY SISTERS LLC (BOOTH 21)

24 Republic Dr  
Monroe Township, NJ 8831  
(561) 523-3428

[absandmags@anxietysisters.com](mailto:absandmags@anxietysisters.com)  
[anxietysisters.com](http://anxietysisters.com)

The Anxiety Sisters are Abbe Greenberg, MCIS and Maggie Sarachek, MSW — trained counselors, educators, researchers, mental health advocates, and long-time anxiety sufferers. They run a worldwide virtual community of over 200,000 people, host a podcast, run support groups, coach anxiety sufferers, and conduct workshops/retreats all over the US. Their book, *The Anxiety Sisters' Survival Guide*, was published by Penguin Random House in 2021.



## BAYLOR COLLEGE OF MEDICINE (BOOTH 24)

1977 Butler Blvd  
Houston, TX 77030  
(713) 798-3579

[Latinostudy@bcm.edu](mailto:Latinostudy@bcm.edu)  
[bcm.edu/departments/psychiatry-and-behavioral-sciences](http://bcm.edu/departments/psychiatry-and-behavioral-sciences)

Baylor College of Medicine and the University of North Carolina are seeking individuals who are interested in learning more and potentially being involved in the Latin American Trans-Ancestry Initiative for OCD Genomics, or LATINO. This project seeks to collect the world's largest ancestrally diverse sample of OCD cases (N = 5,000 Latin American individuals). This study features international collaborations with OCD clinics in Argentina, Brazil, Canada, Chile, Colombia, Ecuador, El Salvador, Paraguay, Peru, and Mexico, as well as OCD clinics in the U.S. This monumental study will address the current Latino representation gap in OCD genetic research by conducting a novel, wide-scale OCD genomic study with robust phenotyping. If interested in learning more, please stop by Booth 24 or email [Latinostudy@bcm.edu](mailto:Latinostudy@bcm.edu).



# EXHIBITORS

## CHILD MIND INSTITUTE (BOOTH 23)

**101 East 56th St  
New York, NY 10022  
(212) 257-9604  
[info@childmind.org](mailto:info@childmind.org)  
[childmind.org](http://childmind.org)**



The Child Mind Institute is dedicated to transforming the lives of children and families struggling with mental health and learning disorders by giving them the help they need to thrive. We've become the leading independent nonprofit in children's mental health by providing gold-standard evidence-based care, delivering educational resources to millions of families each year, training educators in underserved communities, and developing tomorrow's breakthrough treatments. Together, we truly can transform children's lives.

## EQUINOX COUNSELING & WELLNESS CENTER (BOOTH 12)

**600 So. Cherry St, Suite 217  
Glendale, CO 80246  
(720) 653-2720  
[eboyd@equinoxcounseling.com](mailto:eboyd@equinoxcounseling.com)  
[equinoxcounseling.com](http://equinoxcounseling.com)**



Equinox Counseling & Wellness Center is Colorado's Premier intensive outpatient treatment program that has incorporated the best components of residential treatment, wilderness therapy, and holistic milieu services in an outpatient setting. Staffed by a multidisciplinary team of clinicians, evaluators, and parent coaches, Equinox treats youths, young adults, and families experiencing complex psychiatric, emotional, and behavioral health issues.

## IOCDF AFFILIATES (BOOTH 27 & 28)

IOCDF Affiliates carry out the mission of the IOCDF to support all those impacted by OCD and related disorders on the local community level. Each Affiliate is an independent 501(c)3 public charity run entirely by dedicated volunteers. If you'd like to find support in your local community or find ways to get involved in grassroots efforts to raise awareness and funds to support the OCD community in your area, please stop by! Representatives from some of the IOCDF Affiliates will be in the exhibit hall during the following hours:

OCD Central & South Florida | Saturday, July 9, 5:45-7:00pm  
OCD Kansas | Friday, July 8, 11:15am-12:30pm  
OCD Louisiana | Friday, July 8, 11:15am-12:30pm  
OCD Mid-Atlantic | Saturday, July 9, 11:15am-12:30pm  
OCD Midwest | Saturday, July 9, 11:15am-12:30pm  
OCD North Carolina | Friday, July 8, 7:00-8:00am  
OCD Southern California | Saturday, July 9, 5:45-7:00pm  
OCD Washington | Saturday, July 9, 7:00-8:00am  
OCD Wisconsin | Saturday, July 9, 7:00-8:00am



## JACK MENTAL HEALTH ADVOCACY (BOOTH 15)

**P.O. Box 3039  
Ponte Vedra Beach, FL 32004  
(904) 233-6515  
[info@jackmha.org](mailto:info@jackmha.org)  
[jackmha.org](http://jackmha.org)**



JACK Mental Health Advocacy provides access to clinician training, education scholarships, and programming for sufferers and their families.

## LINDNER CENTER OF HOPE (BOOTH 14)

**4075 Old Western Row Rd  
Mason, OH 45040  
(513) 536-0318**



**[info@lindnercenter.org](mailto:info@lindnercenter.org)  
[lindnercenterofhope.org](http://lindnercenterofhope.org)**

For individuals struggling with obsessive compulsive disorder and anxiety, Lindner Center of HOPE, near Cincinnati, OH, offers diagnostic and treatment services ages 6-18 years (in high school) to empower patients and families and help manage symptoms.

## MOLECULERA LABS (BOOTH 17)

**755 Research Pkwy, Ste 410  
Oklahoma City, OK 73132  
(405) 226-5927  
[crossa@moleculera.com](mailto:crossa@moleculera.com)  
[moleculeralabs.com](http://moleculeralabs.com)**



moleculera labs

Moleculera Labs is an autoimmune neurobiology company focused on neuropsychiatric disorders caused by molecular mimicry. As pioneers in developing and offering advanced testing services, we identify whether an individual's neurologic or psychiatric symptoms could be caused by a treatable autoimmune condition. These symptoms can be triggered by infections as well as environmental exposures. As a CLIA/COLA clinical laboratory, we offer the Cunningham Panel, which identifies individuals with infection-triggered autoimmune conditions resulting in neuropsychiatric symptoms.

## NEUROSTAR (BOOTH #29)

**3222 Phoenixville Pike  
Malvern, PA 19355  
(877) 600-7555**



**[info@NeuroStar.com](mailto:info@NeuroStar.com)  
[neurostar.com](http://neurostar.com)**

NeuroStar TMS is an FDA-cleared, non-drug, non-invasive treatment for depression when antidepressant medications have failed and has recently received clearance from the FDA for its transcranial magnetic stimulation system as an adjunct for treating adult patient suffering from obsessive compulsive disorder (OCD). It is widely covered by most insurance companies, including Medicare and Tricare.

# EXHIBITORS

## NEW ENGLAND CENTER FOR OCD AND ANXIETY (BOOTH 13)

612 Main Street  
Melrose, MA 2176  
(339) 927-0737

[Mikala@newenglandocd.org](mailto:Mikala@newenglandocd.org)  
[newenglandocd.org](http://newenglandocd.org)

NECOA is a specialty clinic that helps children, adolescents, and adults who struggle with anxiety, OCD, and related issues to find their strengths and learn how to build lives that they love, one step at a time. We provide effective, evidence-based outpatient care for individuals and groups, and offer intensive outpatient treatment.

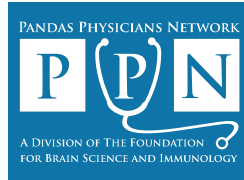


## PANDAS PHYSICIANS NETWORK (PPN) (BOOTH 22)

117 Eastbend Court  
Mooresville, NC 28117  
(855) 347-4921

[support@pandasppn.org](mailto:support@pandasppn.org)  
[pandasppn.org](http://pandasppn.org)

PANDAS Physicians Network (PPN) is a non-profit organization that provides physicians and medical professionals the resources they need to diagnose and treat PANS (Pediatric Acute-onset Neuropsychiatric Syndrome) and PANDAS (Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections). PPN fosters education and communication within the medical community and sponsors research for developing diagnostic tests, treatment protocols, and a cure for PANS/PANDAS.



## RENEWED FREEDOM CENTER FOR RAPID ANXIETY RELIEF (BOOTH 19)

1849 Sawtelle Blvd #710  
Los Angeles, CA 90025  
(310) 268-1888

[Info@RenewedFreedomCenter.com](mailto:Info@RenewedFreedomCenter.com)  
[renewedfreedomcenter.com](http://renewedfreedomcenter.com)

The Renewed Freedom Center was established to help those suffering from OCD and anxiety disorders by providing the most advanced treatment by a multidisciplinary team of experts dedicated to helping patients and their families improve their lives by overcoming OCD and anxiety.



## STANFORD UNIVERSITY BRAIN STIMULATION LAB (BOOTH 16)

401 Quarry Road  
Palo Alto, CA 94304  
(650) 800-6920

[tmsocdstudy@stanford.edu](mailto:tmsocdstudy@stanford.edu)  
[bsl.stanford.edu](http://bsl.stanford.edu)

The Brain Stimulation Lab (BSL) utilizes novel brain stimulation techniques to probe and modulate the neural networks underlying neuropsychiatric diseases/disorders in an effort to develop new models and novel treatments. The BSL offers research study treatments for numerous neuropsychiatric diseases/disorders. Currently, the BSL has several active studies examining topics such as treatment-resistant OCD, treatment-resistant depression, addiction, and suicide. The BSL studies utilize novel brain stimulation techniques, novel psychopharmacological approaches and neuroimaging methods.



## THE OCD AND ANXIETY TREATMENT CENTER (BOOTH 18)

1459 N Main St #100  
Bountiful, UT 84010  
(801) 298-2000

[admissions@liveuncertain.com](mailto:admissions@liveuncertain.com)  
[theocondandxietytreatmentcenter.com](http://theocondandxietytreatmentcenter.com)

We are a specialty clinic that works with OCD and Anxiety Spectrum Disorders, as well as trauma. We have an Outpatient Program, Intensive Outpatient Program and a few different groups. We use ERP (Exposure and Response Prevention) therapy in our OCD/Anxiety IOP and a DBT-PE (Dialectical Behavioral Therapy -Prolonged Exposure) for our trauma IOP. The trauma program accepts adults only, but in our OCD/Anxiety programs we can take as young as five years old.



THE OCD & ANXIETY  
TREATMENT CENTER

## THE OCDOPUS (BOOTH 20)

44 Pacific Ocean Dr  
Brick Township, NJ 8723  
(732) 551-8162

[theocondopus@gmail.com](mailto:theocondopus@gmail.com)  
[theocondopus.com](http://theocondopus.com)

The ocdopus, LLC is an e-commerce store that sells merchandise that motivates OCD recovery and educates the world on what OCD really is. We sell stickers, jewelry, apparel, keychains, and more!



## UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS, DEPARTMENT OF PSYCHIATRY (BOOTH #)

1635 Aurora Ct  
Aurora, CO 80045  
(303) 408-4504

[brandon.fenner@cuanschutz.edu](mailto:brandon.fenner@cuanschutz.edu)  
[medschool.cuanschutz.edu/psychiatry/recruitment](http://medschool.cuanschutz.edu/psychiatry/recruitment)

The CU Department of Psychiatry sets the standard for Education and Training of leaders in psychiatry and mental health care, conducts ground-breaking Research that aims to eradicate suffering due to psychiatric and substance use disorders, provides ready access to state-of-the-art mental health preventions and interventions across the continuum of care, and collaborates with the community and other key stakeholders to promote well-being among all Coloradans.



# Thank you to everyone who participated in an OCD Walk this June!

The fundraising period is still open so make sure to support your local IOCDF Affiliate to help them reach their goal.

More OCD Walks are taking place in October and registration is OPEN NOW! Find an OCD Walk near you and register today. Together we're embracing uncertainty, one step at a time!

Thank you to our sponsors!



Marquee Sponsor

**no**cd

**ROGERS**  
Behavioral Health

**biohaven**  
pharmaceuticals

[iocdf.org/walk](https://iocdf.org/walk)



# RESEARCH POSTERS

This year's research poster presentation is hybrid! All posters below are available online and accessible via the QR code below. Those indicated as in-person posters will also be on display throughout the Conference in the Mineral Foyer on the Third Floor and/or during the Researcher and Exhibitor Meet & Greet on Saturday night from 5:45pm–7:00pm in the Exhibit Hall on the Fourth Floor. Posters marked as in-person will have authors present to answer questions and discuss their work!

We would like to thank our Poster Award Committee members, Eric A. Storch, PhD, Anthony Pinto, PhD, Kiara Timpano, PhD, and Robert Hudak, MD.



This poster can be viewed throughout the in-person Conference in the Mineral Foyer and at the Researcher and Exhibitor Meet & Greet in the Exhibit Hall on Saturday from 5:45–7:00 PM.



This poster and its accompanying presentation can only be viewed online by scanning the QR code to the right.



## GENERAL OCD

1.  **Differential associations between incompleteness and disgust domains**

Shawn Lam (1), Thu P Nguyen, BA,(1) My Ho Huyen Le, (1)  
Antonio Ramirez, BA, (1) Sara M. Stasik-O' Brien, PhD (1)  
(1) Knox College

2.  **Stigma and OCD: A systematic review**

Ryan McCarty, MS (1), Seth Downing, MS (1), Joseph  
McNamara, PhD (1)  
(1) University of Florida

3.  **Obsessive compulsive symptom dimensions and negative emotionality: A systematic review and meta-analysis**

Valerie S. Swisher, BS (1), Emily J. Ricketts, PhD (1), Ivar  
Snorrason, PhD (2)  
(1) University of California, Los Angeles  
(2) Massachusetts General Hospital

4.  **Treatment delay and symptom severity in married and unmarried adults with OCD**

Valerie S. Swisher (1), Steve A. Rogers, PhD (1)  
(1) Westmont College

5.  **The effect of psychological flexibility and inflexibility on the relationship between obsessive compulsive disorder subtypes and self-stigma**

Akshay V. Trisal (1), Morgan E. Browning (1), Elizabeth E. Lloyd-  
Richardson PhD (1)  
(1) University of Massachusetts, Dartmouth

 **Diminished readiness to respond in certain OCD subtypes decreases executive functioning**

Lora Bednarek (1), Helen Pushkarskaya, PhD (1)  
(1) Department of Psychiatry Yale School of Medicine



**Emotion-related impulsivity positively moderates the relationship between intolerance of uncertainty and obsessive compulsive disorder symptom severity**

Junjia Xu (1), Manon Ironside (1), Sheri L. Johnson, PhD (1), and  
Kiara R. Timpano, PhD (2)  
(1) University of California, Berkeley  
(2) University of Miami



**Obsessive compulsive symptoms and distress in daily life: Mediating effects of morality self-perceptions**

Rachel S. Inabata (1), Samantha V. Jacobson, MS (1), Thane M.  
Erickson, PhD (1)  
(1) Seattle Pacific University



**Exploring psychological flexibility and inflexibility processes as transdiagnostic mechanisms across obsessive compulsive symptoms and risk behaviors**

Morgan E. Browning, MA (1), Elizabeth E. Lloyd-Richardson,  
PhD (1)  
(1) Department of Psychology, University of Massachusetts  
Dartmouth



**Obsessive compulsive symptoms during COVID-19: The roles of psychological flexibility and the impact on flourishing**

Morgan E. Browning, MA (1); Elizabeth E. Lloyd-Richardson, PhD  
(1)  
(1) Department of Psychology, University of Massachusetts  
Dartmouth



**Intolerance of uncertainty as contributing factor to OCD traits among individuals with OCD**

Jonathan Teller (1), Rebecca Braverman (1), Michael Wheaton,  
PhD (2), Anthony Pinto, PhD (1)  
(1) Zucker Hillside Hospital, Northwell Health  
(2) Barnard College



# RESEARCH POSTERS

## Post-error slowing in a lifetime sample of individuals with OCD

Abel S. Mathew, MS (1,2), Anna L. Sherman, (2,3), Benjamin D. Greenberg, PhD (2,3), OCD Collaborative Genetics Association Study (OC GAS), & Nicole C. McLaughlin, PhD (2,3)

- (1) University of Wisconsin-Milwaukee
- (2) Alpert Medical School of Brown University
- (3) Butler Hospital

## The Thoughts of Harm Questionnaire: Distinguishing types of violent obsessions

Carly A. Parsons, MA (1), Farah Charania, BEd (1), Lynn E. Alden, PhD (1)

- (1) The University of British Columbia

## Misophonia prevalence and correlation with obsessive compulsive symptoms in university students

Renan Barbosa de Christo, BSc (1, 3), Breno Souza-Marques, BSc (2, 3), Mariana Fontes, MD (2, 3); Vivian Souza Brito Cordeiro, MD (2, 3), Aline Santos Sampaio, MD, PhD (1, 3, 4)

- (1) Faculdade de Medicina da Bahia, Universidade Federal da Bahia
- (2) Pós-graduação em Medicina e Saúde, Faculdade de Medicina, Universidade Federal Da Bahia, Salvador, Brazil
- (3) Laboratório Interdisciplinar de Neuropsicofarmacologia (LANP) Serviço de Psiquiatria, Hospital Universitário Professor Edgard Santos UFBA
- (4) Departamento de Neurociências e Saúde Mental, Faculdade de Medicina da Bahia, Universidade Federal da Bahia

## Perceived responsibility for trauma moderates the indirect effect of trauma on OC symptoms through responsibility/threat beliefs

Emily Fenlon (1), Tom Adams, PhD (1)

- (1) University of Kentucky

## A Canadian national survey assessing resident perceptions of disorder-specific competency in psychiatry residency training

Rahat Hossain, MD (1), Mark Fefergrad, MD, FRCPC, MEd (1, 2), Lance Hawley, PhD, C.Psych(3), Margaret A. Richter, MD, FRCPC (1, 2, 3)

- (1) Department of Psychiatry, University of Toronto
- (2) Department of Psychiatry, Sunnybrook Health Sciences Centre
- (3) Thompson Anxiety Disorders Centre, Sunnybrook Health Sciences Centre

## Altered active perception in obsessive compulsive disorder: Evidence from eye-movement and reaction time data

Anastasia Jankovsky, BA (1), Lora Bednarek (1), Helen Pushkarskaya, PhD (1)

- (1) Yale University, Department of Psychiatry

## Experiential avoidance and obsessive compulsive symptoms in university students

Alexandre Araújo Vasconcelos Silva, (1, 2), Renan Barbosa de Christo, BSc (1, 2), Isabella Ferreira Dias, (1, 2), Lucas de Castro Quarantini, MD, PhD (1, 2, 3, 4), Aline Santos Sampaio, MD, PhD (1, 2, 3, 4)

- (1) Faculdade de Medicina da Bahia, Universidade Federal da Bahia
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- (3) Departamento de Neurociências e Saúde Mental, Faculdade de Medicina da Bahia, Universidade Federal da Bahia
- (4) Pós-graduação em Medicina e Saúde, Faculdade de Medicina, Universidade Federal da Bahia, Salvador, Brazil

## Characterizing intrusive thoughts: Functional differences and similarities among obsessions, worries, and depressive rumination

McKenzie Schuyler (1), Daniel Geller, MD (1, 2), Sabine Wilhelm, PhD (1, 2), Ryan Jacoby, PhD (1, 2)

- (1) Department of Psychiatry, Massachusetts General Hospital,
- (2) Harvard Medical School

## Family planning and OCD: Exploring the relationship between OCD severity and behaviors related to reproductive decision making

Ethan Schweissing (1), Amanda Perozo (1), Madeleine Fuselier (1), Minjee Kook (1), Andrew D. Wiese, PhD (1), Stacey Pereira, PhD (1), Gabriel Lázaro-Muñoz, PhD, JD (2), Wayne K. Goodman, MD (1), Eric A. Storch, PhD (1)

- (1) Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine
- (2) Center for Bioethics, Harvard Medical School

## Beyond doubt: The relationship between interoceptive doubt, OCD symptoms, and the tendency to seek proxies for internal states

Savani Bartholdy, PhD (1), Rebecca Brewer, PhD (1), Olga Luzon, DClInPsy (1)

- (1) Royal Holloway, University of London

RESEARCH POSTERS CONTINUED ON NEXT PAGE →

# RESEARCH POSTERS


## HOARDING DISORDER

11.  **Impact of hoarding and OCD symptomatology on quality of life and their interaction with depression symptomatology**

Binh Nguyen (1), Jessica Zakrzewski, MRes (1), Luis Sordo Vieira, PhD (1), Carol Mathews, MD (1)  
(1) University of Florida

 **The spontaneous identification of HD in others by individuals who meet criteria for hoarding disorder**

Grace Parker (1), Rebecca Henderson, PhD (1), Danielle Cooke, PhD (1), Seth Downing, MS (1), Lauren Appleby (1), Aqueena Fernandez (1), Alexis Garcia (1), Alyssa Nielson (1), Carol Mathews, MD (1)  
(1) Department of Psychiatry, University of Florida

 **A pilot study investigating Social Cognition and Intervention Training (SCIT) for individuals with hoarding disorder**

Wenting Chen (1), Skye McDonald, PhD (1), Travis Wearne, PhD (1), Jessica R. Grisham, PhD (1)  
(1) University of New South Wales

 **On hoarding and its origins: Beliefs about where the seed is planted from which the disorder stems**

Aqueena Mary Fernandez (1), Rebecca Henderson (1), Seth Downing (1), Danielle Cooke (1), Grace Parker (1), Alexandra Garcia (1), Rayon Uddin (1), Alyssa Nielsen (1), Kylie Baer (2), Lauren Appleby (2), Eliza Davidson (2), Carol Mathews, MD (1)  
1) University of Florida  
2) University of California, San Diego

 **Quantifying the association between hoarding symptoms and functional impairment relative to other highly disabling disorders**

Sara K. Nutley, MS (1), Michael Read (2), Joseph Eichenbaum (3,4), Rachel L. Nosheny, PhD (5), Michael W. Weiner, MD (3,4,5), R. Scott Mackin, PhD (3,5), Carol A. Mathews, MD (2)  
(1) University of Florida, Department of Epidemiology  
(2) University of Florida, Department of Psychiatry  
(3) San Francisco VA Medical Center  
(4) University of California, San Francisco, Department of Radiology  
(5) University of California, San Francisco, Department of Psychiatry

## NEUROPSYCHOLOGY

 15.  **fMRI-based network targeting of DBS to treat OCD**

Natalya Slepneva (1), Melanie Morrison, PhD (2), Leo Sugrue MD, PhD (2), A Moses Lee, MD, PhD (1)  
(1) UCSF Department of Psychiatry and Behavioral Sciences  
(2) UCSF Radiology

16.  **Using EEG to evaluate primary visual processing in OCD**

Elizabeth Chapman (1), Carol Mathews, MD (1), Andreas Keil, PhD (1)  
(1) University of Florida

 **Sensory over-responsivity and resting state fMRI global connectivity in obsessive compulsive disorder**

Nicolette Recchia (1,2), Pearl Kravets (1,2), Amanda N. Belanger (1,2), Laura B. Bragdon, PhD (1,2), Goi Khia Eng, PhD (1,2), Katherine A. Collins, PhD (2), Emily R. Stern, PhD (1,2)  
(1) Department of Psychiatry, New York University School of Medicine, New York, NY, USA  
(2) Nathan S. Kline Institute for Psychiatric Research, Orangeburg, NY, USA

## OTHER OCD-RELATED DISORDERS

18.  **Supporting youth with anxiety disorders and BFRBs**

Katrina Scarimbolo, MA (1), Kathy Bradley-Klug, PhD (1), John Ferron, PhD (1), Joshua Nadeau, PhD (2)  
(1) University of South Florida  
(2) Rogers Behavioral Health

 **Other-focused concerns in Asian individuals with body dysmorphic disorder: The need for culturally valid assessment measures**

Rebecca M. Berger-Gutierrez (1), Ivar Snorrason (1), Jennifer L. Greenberg (1), Aisha Usmani (1), Berta J. Summers (2), Angela Fang (3), Katharine A. Phillips (4, 5), Sabine Wilhelm (1)  
(1) Department of Psychiatry, Massachusetts General Hospital/Harvard Medical School  
(2) Department of Psychology, University of North Carolina Wilmington  
(3) Department of Psychology, University of Washington  
(4) Butler Hospital and Alpert Medical School of Brown University  
(5) New York-Presbyterian Hospital and Weill Cornell Medical College

 **Attentional control predicts endorsement of skin picking and symptom severity**

Emily Fenlon (1), Tom Adams, PhD (1)  
(1) University of Kentucky

 **Misophonia assessment tools: A systematic review**

Vivian Cordeiro, MD (1), Renan Christo, BS (2), Breno Souza-Marques (1)  
(1) Programa de Pós-graduação em Medicina e Saúde UFBA  
(2) Universidade Federal da Bahia

# RESEARCH POSTERS

## PEDIATRIC & PERINATAL OCD



### 19. **OCD symptoms observed in a perinatal mood disorder clinic**

Tannaz Mirhosseini (1), Danielle Cooke, PhD (1,2), Ashley Ordway, MEd/EdS (1), Seth Downing, MS (1), Ryan McCarty, MS (1), Megan Barthle-Herrera, PhD (1), Andrea Guastello, PhD (1), Kay Roussos-Ross, MD (1), Carol Mathews, MD (1), Joseph McNamara PhD (1)

(1) University of Florida  
(2) University of Colorado



### 20. **Psychometric properties of the Florida Obsessive Compulsive Inventory in a perinatal population**

Danielle L. Cooke, PhD (1,2), Megan Barthle, PhD (1), Andrea Guastello, PhD (1), Ryan McCarty, MS (1,3), Tannaz Mirhosseini, MA (1,3), Seth Downing, MS (1,3), Joseph P.H. McNamara, PhD (1), Carol Mathews, MD (1), Dikea Roussos-Ross (1,4)

(1) University of Florida Department of Psychiatry  
(2) University of Colorado Anschutz Medical Campus  
(3) University of Florida Department of Clinical and Health Psychology  
(4) University of Florida Department of Obstetrics and Gynecology



### 21. **Obsessive-compulsive symptoms as predictors of outcomes in a perinatal mental health clinic**

Seth Downing, MS (1), Danielle Cooke, PhD (1), Ryan McCarty, MS (1), Tannaz MirHosseini, BS (1), Andrea Guastello, PhD (1), Kay Roussos-Ross, MD (1), Joseph McNamara, PhD (1), Carol Mathews, MD (1)

(1) University of Florida



### **Passing down OCD: An exploration of worries related to reproductive decision-making in females with obsessive compulsive disorder**

Minjee Kook (1), Madeleine Fuselier (1), Ethan Schweissing (1), Andrew D. Wiese, PhD (1), Stacey Pereira, PhD (1), Gabriel Lázaro-Muñoz, PhD, JD (2), Wayne K. Goodman, MD (1), Eric A. Storch, PhD (1)

(1) Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine  
(2) Center for Bioethics, Harvard Medical School



### **Reliability, validity, and treatment sensitivity of the 6-item Child Behavior Checklist Obsessive-Compulsive Scale**

Madeleine Fuselier (1), Daphne Campo (1), Andrew Guzick, PhD (1), Daniel A. Geller, MD (2), Brent J. Small, PhD (3), Wayne K. Goodman, MD (1), Sabine Wilhelm, PhD (2), Tanya K. Murphy, MD (4, 5), Eric A. Storch, PhD (1)

(1) Menninger Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine  
(2) Department of Psychiatry, Massachusetts General Hospital, Harvard Medical School  
(3) School of Aging Studies, University of South Florida  
(4) Department of Pediatrics, University of South Florida  
(5) All Children's Hospital, Johns Hopkins Medicine

## TREATMENT



### 22. **Exploring the potential effects 3,4-Methylenedioxyamphetamine assisted therapy for PTSD on comorbid OCD**

Uma R. Chatterjee (1)

(1) The University of Texas at Dallas, Department of Neuroscience



### **Family accommodation in intensive/residential treatment for adults with OCD**

Kara Kelley (1), Nicole Caporino, PhD (1), Martha Falkenstein, PhD (2)

(1) American University  
(2) Harvard Medical School/McLean Hospital



### **Efficacy of troriluzole as adjunctive therapy in patients with obsessive compulsive Disorder: A proof of concept study**

Loren Aguiar, MD (1), Alexander Bystritsky, MD (2), Azim Munivar, MD (1), Chris Pittenger MD, PhD (3)

(1) Biohaven Pharmaceuticals  
(2) CalNeuro Research Group  
(3) Department of Psychiatry, Yale School of Medicine



### **Exposure therapy processes during brief symptom provocation plus deep Transcranial Magnetic Stimulation for adults with obsessive compulsive disorder**

Ethan Schweissing (1), Amanda Perozo (1), Madeleine Fuselier (1), Minjee Kook (1), Andrew D. Wiese, PhD (1), Stacey Pereira, PhD (1), Gabriel Lázaro-Muñoz, PhD, JD (2), Wayne K. Goodman, MD (1), Eric A. Storch, PhD (1)

(1) Department of Psychiatry and Behavioral Sciences, Baylor College of Medicine  
(2) Center for Bioethics, Harvard Medical School



### **Cognitive disengagement: A new technique for reducing cognitive engagement with obsessive thoughts, images, and urges**

Alex Grattery (1), Michael Greenberg, PhD (1)

(1) OCD Associates

**#OCDweek**  
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# SPECIAL INTEREST GROUP (SIG) MEETINGS

Special Interest Groups (SIGs) are diverse groups of individuals and mental health professionals that share a common interest in OCD and related disorder discussions, networking, education, resource development, and/or research. Each SIG focuses on a specific topic within the OCD and related disorders community. SIGs help cultivate purposeful initiatives that support and advance IOCDF's mission to help those affected by OCD and related disorders. In this way, SIGs work semi-independently and vary in topic, content, structure, and activity level. The ultimate goal of SIGs is to encourage collaboration and communication in order to best support and serve the needs of those within their specific topic area.

## Who should attend a SIG meeting?

Anyone interested in a special topic area is welcome to attend a SIG meeting. SIG membership ranges from professionals in the field (therapists, researchers, etc.), to students/trainees, to passionate individuals and supporters.

All SIG meetings are held in rooms at the Colorado Convention Center across the street from the Conference hotel (see page 10 for the map). Look for the building with the big blue bear!

Special Interest Group	Facilitator(s)	Date/Time	Convention Center Room
Trauma & PTSD in OCD SIG	Nathaniel Van Kirk, PhD	Friday, July 8th 9:45am–11:15am	201
Faith & OCD SIG	Katie O'Dunne, MDiv	Friday, July 8th 12:30pm–2:00pm	203
Young Adult SIG	Kyle King	Friday, July 8th 12:30pm–2:00pm	204
Therapists & Trainees with OCD SIG*	Nathaniel Van Kirk, PhD and Hannah Breckenridge, LMSW	Friday, July 8th 2:15pm–3:45pm	203
Pediatric SIG*	S. Evelyn Stewart, MD and Eric A. Storch, PhD	Friday, July 8th 2:15pm–3:45pm	204
LGBTQ+ SIG	Chris Trondsen, AMFT, APCC and Alex Reynolds	Saturday, July 9th 9:45am–11:15a	203
OCD/Autism SIG	Jonathan Hoffman, PhD, Rebecca Sachs, PhD, and Robert Hudak, MD	Saturday, July 9th 9:45am–11:15am	204
OCD/SUD SIG	Stacey Conroy, LCSW, MPH and Patrick McGrath, PhD	Saturday, July 9th 12:30pm–2:00pm	201
Hoarding Disorder SIG	Kiara Timpano, PhD, Christiana Bratiotis, PhD, MSW, , and Carolyn Rodriguez MD, PhD	Saturday, July 9th 12:30pm–2:00pm	203

\*Open ONLY to Trainees and Professionals

## OTHER MEETINGS

### IOCDF Advocate Meet & Greet Saturday, July 9, 2022 | 2:15–3:45pm Convention Center Room 203

We invite all those interested in raising OCD awareness to come meet our IOCDF Advocates. This will be an opportunity for you to participate in casual conversations and ask questions around topics related to OCD advocacy. We encourage you to come learn more about the value of advocacy, discover creative ways to share your story, and network with others passionate about spreading OCD awareness.

### OCD Southern CA | IOCDF Affiliate General Interest Meeting Saturday, July 9 | 11:15am–12:30pm Convention Center Room 203

Are you from Southern California? Make sure to stop by to learn about upcoming programming and meet leadership from your local IOCDF Affiliate, OCD Southern California! You'll learn more about how to get involved with the Affiliate and meet fellow attendees local to SoCal. See you there!

### Body Dysmorphic Disorder (BDD) Meet Up Friday, July 8 | 8:00–9:30am Convention Center Room 204

New this year! Stop by and connect, network, and socialize with others in the body dysmorphic disorder (BDD) community!

# PROGRAMMING FOR ELEMENTARY, MIDDLE, AND HIGH SCHOOLERS

The IOCDF is excited to offer a unique and exciting Conference experience for young people of all ages. We have individual programming for three distinct age groups: elementary, middle, and high schoolers.

Each program spans all three days of the Conference and incorporates a full set of workshops and activities, including interactive educational sessions, creative workshops, support groups, and much more. The programs are designed to guide each age group through new skills, ways of thinking and behaving, and activities to help them manage their lives with OCD.

In addition, attendees can create a binder to take home after our weekend together ends. These binders will provide a great place for everyone to write, draw, and reflect about what they have learned during the Conference, and will serve as keepsakes of their fond memories and new friends.



Read more about youth sessions, support groups, and evening activities in the descriptions following the daily schedules on pages 29-52.

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# PEDIATRIC PROGRAM



**ELEMENTARY**  
QUARTZ A-B

**MIDDLE SCHOOL**  
GRANITE A-C

**HIGH SCHOOL**  
AGATE A-C

## FRIDAY

<b>8:00AM–9:30AM</b>	<b>ELEMENTARY SCHOOLERS AND FAMILIES ORIENTATION</b> Madeline Conover, LMHC, REAT; Susan Boaz	<b>MIDDLE SCHOOLERS AND FAMILIES ORIENTATION</b> Kat Rossi, LMHC, REAT; Denise Egan Stack, LMHC	<b>HIGH SCHOOLERS AND FAMILIES ORIENTATION</b> Meaghan Cleary, LMHC, R-DMT; Lisa Coyne, PhD
<b>9:45AM–11:15AM</b>	<b>UNHOOK YOUR THOUGHTS!: A COGNITIVE DEFUSION WORKSHOP FOR KIDS</b> Amy Jenks, PsyD; Amy Mariaskin, PhD; Cassie Marzke; Lisa Coyne, PhD	<b>NAME THAT EXPOSURE!</b> Marni Jacob, PhD; Rebecca Schneider, PhD; Kara Meyer, PhD	<b>MINING VALUES FOR COURAGE</b> Ginny Fullerton, PhD; Luke Collier, PsyD; Thien-An Le, PhD
<b>12:30PM–2:00PM</b>	<b>BAM! POW! ZAP! CREATE YOUR OWN OCD SUPERHERO</b> Amy Jenks, PsyD; Cassie Marzke	<b>SUPERHERO THERAPY: SUPERHEROES, COMICBOOK CHARACTERS, AND OTHER FICTIONAL FRIENDS CAN HELP WITH OCD</b> Adam Reid, PhD; Jason Elias, PhD; Keith Klein, PhD; Murrion O'Neill; Theresa LaPuma, PhD	<b>BACK TO BASICS: EXPLORING ERP</b> Amanda Petrik-Gardner, LCPC; Jenna Overbaugh, LPC
<b>2:15PM–3:45PM</b>	<b>CALLING ALL MYSTERY EXPLORERS</b> Emily Hoppe, PMHNP-BC; Nicole D'Adamo, LCSW-C	<b>I'LL BE THERE FOR YOU: A MENTORSHIP WORKSHOP FOR MIDDLE SCHOOLERS AND HIGH SCHOOLERS (open to high schoolers)</b> Caroline K.; Emily Melrose	<b>SUPPORTIVE SIBLINGS: CREATING "ASSISTANT OCD COACHES" IN FAMILIES (open to middle schoolers)</b> Krista Reed, LSCSW
<b>4:00PM–5:30PM</b>	<b>FIGHTING OCD WITH ART!</b> Cassie Marzke; Darcy Howell; Gabriela Holliman Lopez; Max Wilson	<b>ERP SCAVENGER HUNT</b> Amelia Serine, PsyD; Brian Ashenfelter, PsyD; K. Peer Mugnier, PsyD; Kathleen Rupertus, PsyD; Katie Manganello	<b>HOW DO I BECOME MORE WILLING TO DO MY EXPOSURE HOMEWORK?</b> Adam Reid, PhD; Angella Bello

## SATURDAY

<b>8:00AM–9:30AM</b>	<b>THE OCD OLYMPICS</b> Hannah Breckenridge, LMSW	<b>LET'S IMPROVISE! HELPING KIDS MANAGE OCD WITH HUMOR, PLAY, AND IMPROV GAMES</b> Kelley Franke, LMFT; Kevin Foss, MFT	<b>WEAVING ART THROUGHOUT THE THERAPY JOURNEY</b> Joan Zeller, LMSW, ATR
<b>9:45AM–11:15AM</b>	<b>LETTING YOUR PARENTS OFF THE HOOK</b> Marni Jacob, PhD; Molly Martinez, PhD; Katy Rothfelder, LPC	<b>THE TIME TO PRACTICE IS NOW: HOW TO TALK ABOUT OCD, ANXIETY, AND BIG EMOTIONS WITH YOUR PARENTS</b> Allison Bonifay, LPC; Kevin Ashworth, LPC	<b>HOW TO RAISE YOUR PARENTS WHEN YOU HAVE OCD (TO HELP OR GET OUT OF THE WAY)</b> Allen Weg, EdD; Megan Cox, PsyD
<b>12:30PM–2:00PM</b>	<b>FACING FEARS WITH FRIENDS: WE'RE ALL IN THIS TOGETHER</b> Miranda Higham, MS; Robert Henderson, PhD; Seth Downing, MS; Tannaz Mirhosseini; Ashley Ordway, LMHC	<b>IT'S ALL FUN AND GAMES: CHALLENGING PERFECTIONISM, SYMMETRY, AND "JUST RIGHT" OCD</b> Jennifer Wilcox, PsyD; Kellie Korte; Lindsey Conover, PhD; Nicole Bosse, PsyD	<b>THE PEOPLE PLEASER'S GUIDE TO BEING ASSERTIVE</b> Anna Korbel, LSW; Emily Hemendinger, LCSW, MPH; Stephanie Lehto, PsyD
<b>2:15PM–3:45PM</b>	<b>WHEN OCD WANTS TO GO TO SCHOOL WITH YOU</b> Natasha Daniels, LCSW	<b>THE TIME TO PRACTICE IS NOW: COMING TOGETHER TO IMPROVE COMMUNICATION AND UNDERSTANDING OF LIVING WITH OCD</b> Allison Bonifay, LPC; Kevin Ashworth, LPC (Combined session for Parents/Guardians and Middle Schoolers)	<b>BEHIND THE CURTAIN: WHAT TEENS AND PARENTS WISH THE OTHER KNEW</b> Allen Weg, EdD; Megan Cox, PsyD (Combined session for Parents/Guardians and High Schoolers)
<b>4:15PM–5:45PM</b>	<b>KEYNOTE ALTERNATIVE: DANCE LIKE NO ONE'S WATCHING!</b> Molly Martinez, PhD; Justin Hughes, LPC		<b>CONFERENCE KEYNOTE: THE KINBERG FAMILY</b> Centennial Ballroom

## SUNDAY

<b>8:00AM–9:30AM</b>	<b>SILLY VOICES AND BEACH BALLS!</b> Amanda Petrik-Gardner, LCPC; Caroline K.	<b>OUTSMARTING YOUR OCD: DODGING TRAPS AND PREVENTING RELAPSE</b> Kyle King; Marni Jacob, PhD; Rebecca Schneider, PhD	<b>REMOVING THE OCD FROM SOCIAL MEDIA: HOW TO HAVE MORE SOCIAL AND LESS MEDIA</b> Emily Hemendinger, LCSW, MPH; Stephanie Lehto, PsyD
<b>9:45AM–11:15AM</b>	<b>LEARN HOW TO SPOT AN OCD WEED AND STOP IT FROM GROWING!</b> Natasha Daniels, LCSW	<b>SIMON SAYS, "TOUCH THE TOILET!": FINDING OCD ERP OPPORTUNITIES IN DAILY ACTIVITIES AND MAKING IT FUN</b> Alyssa Faro, PhD; Caitlin White, LICSW; Maria Fraire, PhD; Rebecca Schneider, PhD	<b>MEET YOUR DNA-V: A BRIEF INTRODUCTION TO ACCEPTANCE AND COMMITMENT THERAPY FOR TEENS</b> Julie Petersen, MS; Michael Twohig, PhD
<b>11:30AM–1:00PM</b>	<b>CONFERENCE WRAP-UP</b> Madeline Conover, LMHC, REAT	<b>CONFERENCE WRAP-UP</b> Kat Rossi, LMHC, REAT	<b>CONFERENCE WRAP-UP</b> Meaghan Cleary, LMHC, R-DMT

# THURSDAY SCHEDULE

## OVERVIEW

THURSDAY, JULY 7

<b>8:00AM–9:00AM</b>	<b>Check-In and Onsite Registration for the IOCDF Research Symposium</b> <i>Centennial Foyer, Third Floor</i>
<b>9:00AM–5:00PM</b>	<b>IOCDF Research Symposium</b> <i>Mineral D–G, Third Floor</i> <b>Sponsored by the Rodan Family Foundation</b>
<b>2:00PM–8:00PM</b>	<b>Check-In and Onsite Registration for Annual OCD Conference</b> <i>Centennial Foyer, Third Floor</i>
<b>6:30PM–9:00PM</b>	<b>Thursday Evening Activities &amp; Support Groups</b> Turn to pages 29-31 for descriptions and a detailed schedule.
<b>8:00PM–11:00PM</b>	<b>Karaoke Icebreaker!</b> <i>McNichols Civic Center Building (off-site)</i> <i>144 W Colfax Ave Denver, CO 80202 (.4 mile / 9min walk or take the shuttle from the lobby)</i> All Conference attendees (21+) are welcome to the Karaoke Icebreaker event taking place just down the street from the Conference hotel at the historic McNichols Building! Enjoy music, games, and a drink on us upon arrival! Turn to page 31 for more details and directions.

-ADVERTISEMENT-

## TMS for Adults with Obsessive Compulsive Disorder

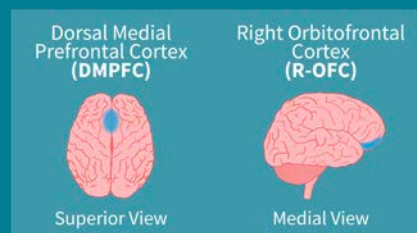
### Our Study

TMS has been shown to be an effective form of treatment in individuals with Obsessive Compulsive Disorder (OCD). By using a form of TMS termed **theta-burst stimulation (TBS)**, we hope that this will result in a **more effective treatment** by producing **faster symptom reduction**.

Standard TMS involves an 18-minute treatment session daily for 5 consecutive days over the course of 6 weeks.

We are trialing a **novel form of accelerated TBS**, where we will deliver ten 10-minute sessions per day, for up to 5 days.

This study will compare the efficacy of TMS for OCD at two distinct brain regions. Participants will be randomized into one of two study groups, and receive stimulation at either the **DMPFC** or **R-OFC**. Both regions have been linked to OCD by research.



Participants who do not experience a reduction in OCD symptoms following treatment to one brain region will have the option to receive treatment at the other.

Begin our intake survey:  
[redcap.link/OCDStudy](https://redcap.link/OCDStudy)

We're looking for participants who:

- Are **18-80** years of age
- Have a **diagnosis/prominent symptoms of OCD**

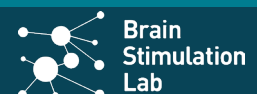
We reluctantly cannot accept any participants who:

- Have any brain lesions or other clinically significant abnormalities
- Are pregnant
- Have any non-MRI safe implants
- Have a history of epilepsy / seizure

For participant's rights questions, contact 1-866-680-2906.



[bsl.stanford.edu/for-patients](https://bsl.stanford.edu/for-patients)  
[TMSOCDStudy@stanford.edu](mailto:TMSOCDStudy@stanford.edu)





# THURSDAY ACTIVITIES

8:00am–5:00pm

## IOCDF Research Symposium Mineral D–G

Co-chaired by Christopher Pittenger, MD, PhD, & Emily Stern, PhD

Sponsored by



The IOCDF Research Symposium provides a forum for high-level discussion of research topics among people who specialize in the study of OCD and related disorders.

Now in its 7th year, the Symposium is intended to complement the "Research to Clinical Practice" track for researchers who attend the Annual OCD Conference.

The Research Symposium brings researchers together from around the world to discuss their findings, fostering increased collaboration and networking across research groups. This is in contrast to the "Research to Clinical Practice" track, where research findings are presented to a mixed audience of researchers, therapists, and consumers who are interested in advanced-level topics. It is our hope that these complementary offerings will make the Annual OCD Conference a truly enriching experience for OCD and related disorders researchers.

## YOUTH ACTIVITIES

6:30PM–7:30PM

### ERP Escape Room Agate A-C

Jennifer Wells, LISW-S, Lindner Center of HOPE; Jennifer Wilcox, PsyD, Lindner Center of HOPE; Kellie Korte, Lindner Center of Hope

Enter the Lindner Center of HOPE's Escape Room, where the only way to escape is to face your OCD! Join other teenagers at this evening activity where you can get to know each other, work together, solve puzzles, and have fun! The escape room will have an assortment of puzzles and challenges that will allow participants to challenge their OCD through ERP, strategically decide to refrain from tasks or accept assistance, and embrace the power of teamwork and emerging friendships. This will be a fun, interactive activity for all teenagers at the conference, with or without OCD.

### Late Night Recess: Meet, Great, and Game! Quartz A-B

Kyle King

Yay! You made it to the conference! No matter if this is your first or nine-hundred and eighty-fourth conference, this weekend is bound to be full of sharing, exploring, and fun messing around with new friends. It will also be full of learning — but before we get to that, let's have some fun on the first night! If you're in elementary school and want to meet some new friends while getting active, releasing some energy, and stealing bacon, come to this session!

## SUPPORT GROUPS

6:30PM–7:30PM

### Support Group for Transgender, Nonbinary, and Gender Nonconforming People with OCD Centennial D

Bree Horrocks, MEd; Katie Boyer, LMSW; Amy Mariaskin, PhD

This support group will provide a nonjudgmental and affirming environment for people with OCD and related disorders who are transgender, nonbinary, or otherwise gender nonconforming. It is open to adults who want to discuss their OCD symptoms as well as the intersections between mental health, gender, and other aspects of identity. Additionally, the group will allow for individuals to process their experiences within the mental health system and the challenges of finding well-trained OCD treatment providers who are also competent in gender diversity. The leaders will seek to center the voices of participants.

### Support Group for Parents of Kids with OCD Capital 5-7

Jennie Kuckertz, PhD, McLean Hospital; Melissa Mose, LMFT, OCD SoCal

Parenting a child with OCD presents a variety of challenges. Parents often struggle to resist accommodating OCD symptoms while remaining compassionate and attuned. This task becomes even more challenging when conflicting needs arise among

siblings, other family members, or your own self-care. This support group will create a space for parents to reflect on their experience of parenting a child with OCD as well as practical issues such as how to respond when a child refuses treatment, strategies for managing siblings, and finding resources in the community. This discussion will be facilitated by two clinicians who work with children with OCD and their families, one of whom is also a parent of a child with OCD.

### Let's Talk About Relapse: How To Quickly Get on Your Feet when OCD Strikes! Centennial G-H

Christopher Weston, MPH, AMFT

You feel great and seemingly have been able to put OCD behind you. You may occasionally have some small setbacks but for the most part life is good and OCD seems to be a distant memory. Then, seemingly out of nowhere, you have been transported back to OCD hell. You have questions such as, "What happened?" "Why?" "What did you do?" More importantly, "How do you get back?" This support group discussion will be a safe place for anyone who has OCD and/or supportive family members who have experienced setbacks in OCD recovery. We will share and discuss what works and how to quickly get back on your feet and on with your life!

### Support Group for Those With Body-Focused Repetitive Behaviors (BFRBs) and OCD Mineral D-G

Charles Mansueto, PhD, Behavior Therapy Center of Greater Washington; Fred Penzel, PhD, Western Suffolk Psychological Services

OCD and BFRBs (Hair-Pulling Disorder, Skin-Picking Disorder, Severe Nail Biting, etc.) are frequently seen to occur together. Many people brush them off as simply bad habits, but their consequences can be serious both physically and emotionally. BFRBs are often characterized by stigma and isolation. This will be an opportunity to break through both of these problems, and discuss experiences non-judgmentally, as well as find out what resources and types of effective help are available.

### Emetophobia Support Group Centennial C

James Claiborn, PhD

Emetophobia is a fear of vomiting. This can occur as a specific phobia, or as part of the presentation of OCD and Health Anxiety concerns. This group will be a support group for individuals with emetophobic symptoms and friends, family members or others concerned about someone with emetophobia. Dr. Claiborn will moderate the discussion, and attendees can discuss their experiences, ask questions, exchange ideas and support one another.

### All-Inclusive Women's Support Group Centennial A

Beth Brawley, LPC, Life Without Anxiety LLC; Michelle Massi, LMFT, Anxiety Therapy LA

This group will provide a safe and supportive environment to discuss ways we can stand together and support one another as we progress through our mental health challenges. Participants will have the opportunity to share their own personal struggles AND successes and take part in empowering each other to live a full life despite managing mental illness. Participants will also have a chance to discuss how uncertainty regarding women's rights impacts their mental wellness. This group is a support group for all woman-identified and non-binary, with OCD, depression, eating disorders, BFRB's, and any other mental struggles.

### Man Up: Real Men Talk About Their Feelings (An Interactive Support Group for Men with OCD) Centennial F

Jacques Esses, MSW, The Gateway Institute

Are you a male suffering with OCD and haven't found a safe place to discuss your issues? Participants will have the opportunity to share their experience navigating the unique challenges they face, including being encouraged to "man up," opening up to their girlfriends or partners about the mental disorder, keeping their anger in check, dealing with medication side effects, finding an OCD therapist, and admitting they need help. This support group will provide a safe space where men are able to ask questions and engage in discussion on topics they face being a male with OCD.

# THURSDAY EVENING

## Support Group for Parents of Adult Children with OCD *Centennial B*

**Ben Eckstein, LCSW, Bull City Anxiety**

This group is intended for parents of adult children with OCD. There are many unique challenges that arise for parents when OCD continues into adulthood. This group will provide parents a safe and supportive place to discuss their experiences navigating this journey. Topics may include: encouraging loved ones to seek treatment, building incentives and fostering motivation, setting boundaries, eliminating accommodation behaviors, and managing dependent adults who are still in the home.

## Olfactory Reference Syndrome Support Group *Convention Center 203*

*(Outside of hotel)*

**Shanda Curiel, PsyD, Allay OCD, LLC**

Olfactory Reference Syndrome is a persistent, erroneous belief of emitting an offensive odor (within OCD/BDD). There is no actual odor; however, others' benign expressions & actions are misappraised as indicating so. Over time, the person may "perceive" a foul odor, further reinforcing their fears. Common fears: natural body scents, genital odors, bodily secretions, foods, ammonia, cigarettes, halitosis, etc. Great measures are taken to control or camouflage with long-sleeves, pants, scents, showering excessively, checking (sniffing air), asking for reassurance, scanning others' reactions, rumination, & medication interventions. Also, avoiding eye contact, proximity, affection, words, foods, dating, sex, exercise, heat, sweat, transportation, appointments, employment, & being in public. Often overlooked, this group is to bring together a community that might otherwise avoid attending.

## You Are Not Alone: A Support Group for Middle Schoolers with OCD *Granite A-C*

**Kat Rossi, LMHC, REAT**

Middle schoolers diagnosed with OCD may feel alone, as if no one else could possibly understand their experience. Chances are, they have never met anyone else in their age group who has been diagnosed with OCD. They may feel ashamed of their intrusive thoughts and accompanying compulsive behavior, so they have learned to hide those thoughts and feelings from others. This can be quite isolating. For young adolescents diagnosed with OCD, meeting others with a diagnosis of OCD their own age can be profound, bringing them comfort and relief. This support group seeks to: Normalize the experience of having OCD; Offer peer support through shared stories; Reduce shame and stigma surrounding a diagnosis of OCD; Create connection; and Reduce isolation

## Help! I'm a Parent of a Teenager! *Mineral B-C*

**Alejandra Sequeira, PhD, McLean OCD Institute in Houston; Emily Bailey, PsyD, McLean OCD Institute in Houston**

This support group will focus on talking about stressors that are unique to being a parent of a teenager. Attendees will get an opportunity to talk with and learn from other parents who are navigating the nuances of raising a teenager with OCD or related disorder. Come prepared with questions or concerns so we can ensure a lively and supportive conversation!

## Support Group for Sexual, Violent, and Other Taboo Obsessions *Convention Center 204 (outside of hotel)*

**Chad Wetterneck, PhD, Rogers Behavioral Health; Nicholas Flower, PsyD, OCD Spectrum**

Sexual and violent obsessions in OCD are common but frequently unrecognized or misunderstood. Sexual obsessions can include worries about sexual orientation, being a pedophile, or acting out sexually. Violent obsessions may include fears about harming someone through various means. People with sexual and violent obsessions in OCD may experience greater distress, have more difficulty locating effective treatment, and require more time in treatment compared to those with other forms of OCD. The purpose of this support group is to provide members who identify as having this version of OCD an opportunity to discuss their experiences of stigma, shame, and rejection surrounding their symptoms in a supportive environment.

## 8:00PM–9:00PM

### Overcoming Religious Scrupulosity Support Group *Centennial D*

**Ted Witzig, Jr., PhD, Apostolic Christian Counseling and Family Services**

This group is intended for those who suffer from religious scrupulosity (OCD entwined with religious and moral matters). Family members and close friends of someone with scrupulosity are also welcome to attend. Join others in a professionally-led psycho-education and support group. This will be an interactive group so that participants can learn from the leader and one another about ways to overcome scrupulosity. While the group is primarily focused on religious scrupulosity, individuals with moral scrupulosity are welcome.

### Finding Community: An LGBTQ Support & Discussion Group *Capital 5-7*

**Alexandra Reynolds; Justine De Jaeger**

Navigating the waters of life with OCD can feel difficult and isolating. It can feel even more acutely so as a member of the LGBTQ community. The LGBTQ support group is here to offer camaraderie, support, and a space for LGBTQ OCD sufferers and allies. During this moderated group discussion, members of the LGBTQ+ Special Interest Group (SIG) will create a safe space for participants to share their unique experiences and support and assist each other. Additionally, they are encouraged to ask questions and contribute to an open discussion about LGBTQIA+ issues and how they intersect with the OCD community.

### People of Color Community Support Group *Centennial G-H*

**Erjing Cui, LMHC**

Race and culture can have a significant impact on both the manifestation of OCD and the lived experiences of persons of color (POC) with OCD. Cultural competence treatment is often needed to address these cultural factors related to POC sufferers' functioning. This support group aims to provide a safe space for persons of color to connect and to discuss these challenges, including, but not limited to, language barriers, cultural differences, racial trauma, and/or microaggressions faced both within and outside of therapeutic settings. Family members and POC clinicians are also welcome to join.

### Support Group for Health Anxiety *Centennial C*

**Scott Granet, LCSW, The OCD-BDD Clinic of Northern California**

This is a support group for individuals and family members who suffer from either somatic symptom disorder or illness anxiety disorder. We will look at treatment options that have been effective, including CBT, Exposure Response Prevention, ACT, and Mindfulness. Individuals will get an opportunity to discuss how it manifests for them in their day-to-day lives and what has helped them or has made their symptoms and/or anxiety worse. Examples of how to handle situations related to these thoughts and bodily sensations will be discussed in order to help people when they leave the conference.

### Is This Real Life? Existential OCD Support Group *Centennial A*

**Elizabeth Garis, MEd, University of Florida; Miranda Higham, MS, University of Florida**

An often-underrepresented sub-genre of OCD is existential OCD: defined by the IOCDF as "intrusive, repetitive thinking about questions which cannot possibly be answered, and which may be philosophical or frightening in nature, or both." So, the question arises: how do you find the gusto to combat a thought that makes everything you do seem meaningless, pointless, or fake? In this group, we will be discussing our experiences with existential OCD, weighing sources of motivation, and handing out useful tips and tricks for activating oneself behaviorally and combating overwhelming emotion. We will expound on useful exposure strategies, ways to get out of bed on those bad days, and how to find meaning in a OCD-described meaningless world!

### Support Group for Parents of Youth with PANS/PANDAS *Centennial F*

**Margo Thienemann, MD, Stanford University; Sana Ahmed, LCSW, Stanford Children's Hospital**

This support group is intended for parents of individuals who have been diagnosed with PANS or PANDAS. Rather than an information session about the syndromes, and not a format for discussing whether an individual has PANS or PANDAS, the group will focus on the impact having a diagnosed child can have on parents, parenting and the family, and will discuss possibly helpful coping strategies.

# THURSDAY EVENING

## Relationship OCD: How to Work with Partners *Centennial B*

Alexis Milton

Relationship OCD is a subtype that affects other (non-diagnosed) individuals more often than some other subtypes, as the obsession is about the individual's partner or relationship. This means the partner of the person with OCD is inevitably involved in their recovery. How best can we involve our partners in our treatment and recovery without overwhelming them? How do we involve them when our OCD involves unwanted thoughts about and compulsive avoidance of our partners? I propose a discussion group of people with Relationship OCD to discuss what has worked/not worked for them in the past, as well as family members/partners for their perspectives.

## A Support for Clinicians Living with OCD *Mineral B-C*

Kelley Franke, LMFT, *The Center for OCD*;

Lauren Rosen, LMFT, *Center for the Obsessive Mind*

As two clinicians with OCD practicing in the field, we are intimately aware of both the challenges and opportunities that come from working with OCD (and other related anxiety conditions) while managing it personally. The presentation will address some of the challenges including: when a clinician's OCD is triggered by client content, and when therapists experience frustration that clients are unable and/or unwilling to manage symptoms that the therapist is able to manage personally. It will also address the benefits and opportunities working as a therapist with OCD offers including: the therapist's ability to both sympathize and empathize with the client, understanding the complexities of a "doubting disorder," and the difficulties of tolerating uncertainty.

## You Are Not Alone: A Support Group for Older Adolescents with OCD *Agate A-C*

Meaghan Cleary

Older adolescents diagnosed with OCD may feel alone, as if no one else could possibly understand their experience. Chances are, they have never met anyone else in their age group who has been diagnosed with OCD. They may feel ashamed of their intrusive thoughts and accompanying compulsive behavior, so they have learned to hide those thoughts and feelings from others. This can be quite isolating. For older adolescents diagnosed with OCD, meeting others with a diagnosis of OCD their own age can be profound, bringing them comfort and relief. This support group seeks to normalize the experience of having OCD, offer peer support through shared stories, reduce shame and stigma surrounding a diagnosis of OCD, and create connection and reduce isolation.

## Sibling Support Group *Youth (18 and below) Granite A-C*

Michelle Witkin, PhD; Tatum Demeter

Do you have a brother or sister with OCD? Do you feel like OCD impacts you, too, but nobody else seems to understand? Or maybe you just wish you had others to talk to who "get" what it's like to have a sibling with OCD. Come join other siblings, get to know each other, connect, share, and learn ways to take care of you while OCD is around.

## AA 12 Step Meeting, Open Speaker Discussion Meeting

*Convention Center 203 (outside of hotel)*

Stacey Conroy, LICSW, MPH, *Veterans Health Administration*

AA meeting led by Stacey Conroy. Stacey Conroy is a Social Work, Public Health professional specializing in Substance Use Disorder & co-occurring anxiety disorders. Her clinical work has been with individuals who have a Substance Use Disorder (SUD) and co-occurring anxiety disorders. In addition, Stacey has 28 years in Recovery and advocates for effective evidence-based treatment for co-occurring disorders.

## Young Adult Support Group and Orientation

*Convention Center 204 (outside of hotel)*

Kyle King; Thomas Smalley, CSCS

Young adults — welcome to the conference! You are in a challenging, yet exciting period of your life that is filled with transitions and significant life changes. However, having OCD adds difficulty to this experience. This community discussion group is meant to offer you a safe space to communicate these challenges and to gain peer support. In addition, the leaders of the Young Adult track will share important logistical information to help you get the most out of the conference. This group is a great way to kick off the weekend, to get to know the conference and each other!

## EVENING ACTIVITIES

### Icebreakers and Game Night! *Youth (18 and below) Quartz A-B*

Marni Jacob, PhD, *Jacob Center for Evidence-Based Treatment*

Join fellow attendees for a fun, interactive, social activity to welcome you to IOCDF 2022! Get to know other attendees through some icebreakers, games, and competitions. Be sure to bring your energy and enthusiasm.

### 8:00PM–9:30PM

#### Solo Attendee Meet-Up: Break the Ice! *Mineral D-G*

Angela Bello; Meaghan Dominick, *OCD Georgia*



Are you traveling to the Conference on your own, or looking for an easy and low-key way to meet new people? In the second year of this meet-up group, participate in a range of icebreaker activities in small groups to find common ground and kick off new 'Conference Buddy' friendships.

We'll rotate and mix up the groups a few times, so by the end of the meet-up, you'll have many more familiar faces. If you'd like, pick up a 'Community Connect' button at the end of the event. Wearing this button lets others know that you're interested in meeting new people throughout the conference, and that they're welcome to walk up and say "hello!"

### 8:00PM–11:00PM

#### KARAOKE ICEBREAKER

McNichols Civic Center Building

144 W Colfax Ave. Denver, CO 80202

.4 mile / 9min walk or take the shuttle from the hotel lobby



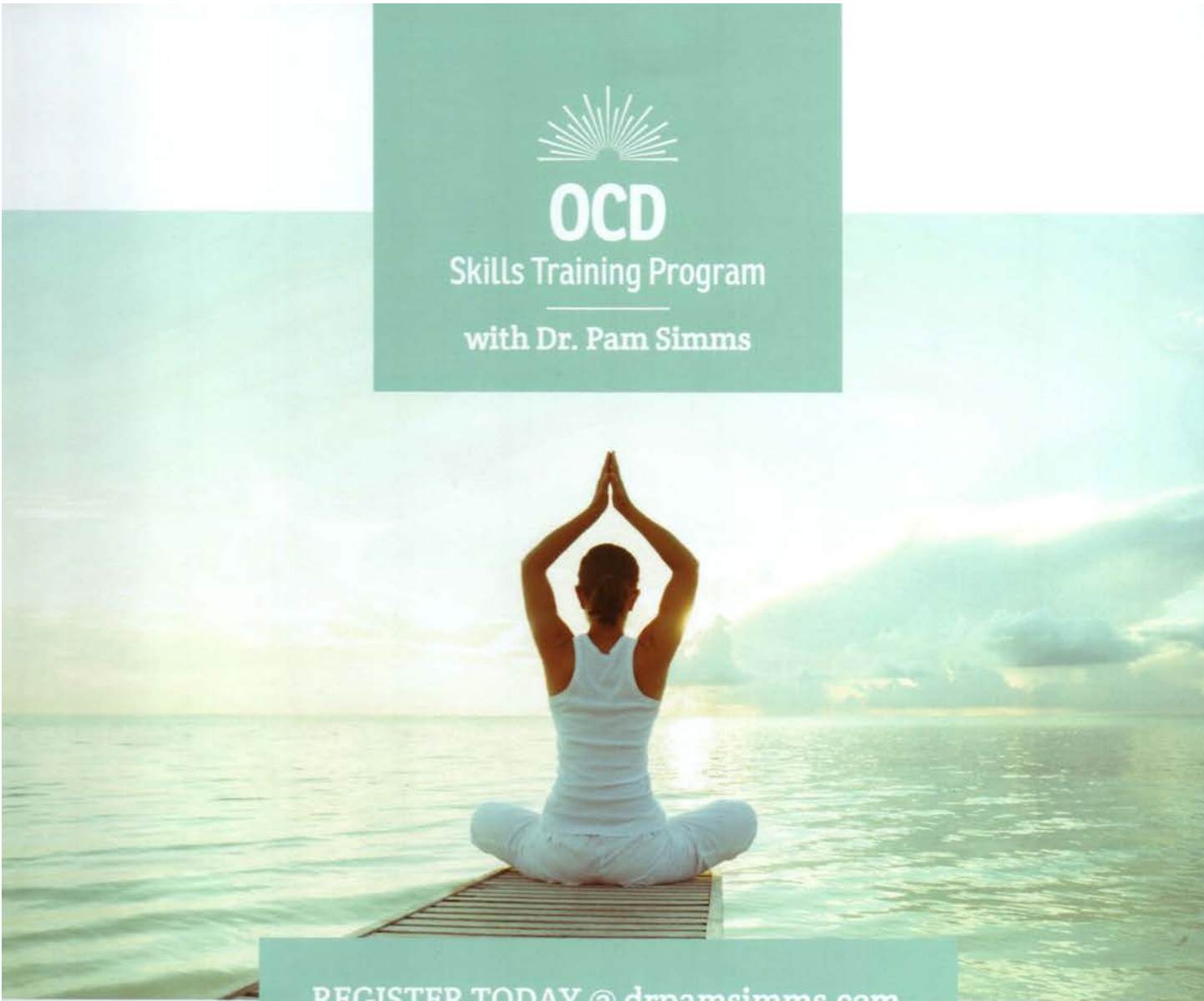
All Conference attendees (21+) are welcome to the Karaoke Icebreaker event taking place just down the street from the Conference hotel at the historic McNichols Building! Enjoy music, games, and a drink on us upon arrival!



# OCD

## Skills Training Program

with Dr. Pam Simms



REGISTER TODAY @ [drpamsimms.com](http://drpamsimms.com)

A 12-WEEK PROGRAM ~ Adolescent & Adult Classes



### Balanced Mind

A balanced, flexible and open-focused mind creates clarity and space that nurtures self-love and self-acceptance. Evidence-based skills will be taught to balance the mind and neutralize symptoms of OCD, rendering them irrelevant to one's life journey.



### Balanced Body

The body holds stress in the form of poor gut health, muscle tension and toxins that create imbalance in the body. Stress is known to make OCD worse. Evidence-based stress management skills and nutrition will be taught to foster a grounded, healthy body.



### Balanced Energy

Energy blocks in the body and mind, often resulting from past traumas, prevent free flowing energy throughout the physical and spiritual body. Evidence-based energy freedom skills will be taught to empower the individual to self-heal and gain freedom from OCD.

ALL CLASSES ARE VIRTUAL

[www.drpamsimms.com](http://www.drpamsimms.com)





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# FRIDAY SCHEDULE

## OVERVIEW

FRIDAY, JULY 8

<p><b>7:00am–8:00am</b></p>	<p><b>Light Breakfast</b>  <i>Exhibit Hall, Capital Ballroom 1–4 and Foyer, Fourth Floor</i></p> <p>The Conversation Cafe is back! High-top tables will be scattered throughout the rear of the Exhibit Hall. Tables will be assigned specific themes and topics to help attendees connect with similar experiences and meet new people.</p>	 <b>Breakfast</b>
<p><b>7:00am–6:00pm</b></p>	<p><b>Check-in and Onsite Registration</b>  <i>Centennial Foyer, Third Floor</i></p>	
<p><b>7:00am–6:00pm</b></p>	<p><b>Continuing Education Desk Open</b>  <i>Centennial Foyer, Third Floor</i></p> <p>All professional attendees registered at the Therapist/Clinician level seeking to earn continuing education (CE) credit must sign in and out at the start and end of each day, the exception being Psychologists who will need to check-in to each session attended. See page 6 for CE/CME information.</p>	
<p><b>7:00am–5:30pm</b></p>	<p><b>Exhibit Hall Open</b>  <i>Exhibit Booths, Capital Ballroom 1–4 and Foyer, Fourth Floor</i></p> <p>OCD Conference Bookstore          Art Gallery          IOCDF Information &amp; Welcome Booth  <i>See page 14 for a list of Exhibitors.</i></p>	 <b>Bookstore</b>
<p><b>8:00am–5:30pm</b></p>	<p><b>Conference Presentations</b>  <i>See pages 36–41 for a full schedule of presentations.</i></p>	
<p><b>8:00am–5:30pm</b></p>	<p><b>Youth Programming</b>  <i>Elementary: Schoolers Quartz A-B, Third Floor</i>  <i>Middle Schoolers: Granite A-C, Third Floor</i>  <i>High Schoolers: Agate A-C, Third Floor</i>  <i>See page 27 for a full schedule of activities and pages 36-41 for details.</i></p>	
<p><b>11:15am–12:30pm</b></p>	<p><b>Book Signings at OCD Conference Bookstore</b>  <i>Exhibit Hall, Capital Ballroom 1–4, Fourth Floor</i>  <i>See page 13 for a list of authors.</i></p>	 <b>Bookstore</b>
<p><b>11:15am–12:30pm</b></p>	<p><b>Lunch on Your Own</b>          Check the Program Guide Insert for local restaurant listings. Stop by the Exhibit Hall to check out our vendors!</p>	
<p><b>2:00pm–2:15pm</b></p>	<p><b>Afternoon Coffee Break</b>  <i>Exhibit Hall, Capital Ballroom 1–4 and Foyer, Fourth Floor</i></p>	
<p><b>5:30pm–8:00pm</b></p>	<p><b>Professional Mentoring Session &amp; Networking Mixer</b>  <i>Chambers Grant Salon within the Ellie Caulkins Opera House</i>  <i>1385 Curtis Street, Denver, CO 80204 (0.2 miles / 5 minute walk from hotel)</i></p> <p>Therapist/Clinician attendees of the Conference are welcome to a mentoring and networking event to connect with their fellow professionals.</p> <p><b>Sponsored by Rogers Behavioral Health</b></p>	
<p><b>6:00pm–10:00pm</b></p>	<p><b>Friday Evening Activities &amp; Support Groups</b>  <i>Turn to pages 42-43 for descriptions and a detailed schedule.</i></p>	

8:00AM–9:30AM

9:45AM–11:15AM

12:30PM–2:00PM

EVERYONE

**OCD: PAST, PRESENT AND FUTURE PERSPECTIVES**  
Alec Pollard, PhD; Charles Mansueto, PhD;  
Jon Grayson, PhD; Jonathan Hoffman, PhD;  
Katia Moritz, PhD  
*Mineral D-G*

**"I THINK MY DECISION-MAKER IS BROKEN":  
NAVIGATING VALUE-BASED DECISIONS  
FROM COMPULSIONS**  
Angela Smith, PhD; Bridget Henry, PhD;  
Cali Werner, LCSW; Jelani Daniel, LPC  
*Centennial D*

**THE COST OF RECOVERY: MAXIMIZING YOUR  
INSURANCE BENEFITS TO COVER OCD TREATMENT**  
Felice Becker; Fred Penzel, PhD; Gabriela Cox;  
Molly Martinez, PhD  
*Centennial D*

EVERYONE

**DBT RADICAL ACCEPTANCE FOR OCD**  
Beth Brawley, LPC; Shanda Curiel, PsyD  
*Centennial C*

**CBT FOR OCD: AN OVERVIEW AND RESEARCH UPDATE  
FOR CONSUMERS AND FAMILIES**  
Jonathan Abramowitz, PhD  
*Centennial G-H*

**OCD REBUTTALS**  
Jon Hershfield, LCMFT; Michael Heady, LCPC;  
Michelle Massi, LMFT; Shmuel Fischler, LCSW-C  
*Capital 5-7*

LIVING WITH OCD

**OCD TRIVIA: HOW MUCH DO YOU KNOW?**  
Ashley Bramhall, AMFT; Jennifer Lynch, PsyD;  
Jenny Yip, PsyD; Sarah Haider, PsyD  
*Centennial D*

**THE STRUGGLE IS REAL: DROPPING THE STRUGGLE  
AND MOVING ON WITH LIFE**  
Allyson Guilbert, LCSW;  
Annabella Hagen, LCSW;  
Jon Case, LCSW; Erik Wells, LCSW  
*Capital 5-7*

**TURNING TRIGGERS INTO EXPOSURES: LEANING IN AND  
PRACTICING RESPONSE PREVENTION IN RECOVERY**  
Amy Mariaskin, PhD; Chris Pursell, LMSW;  
Kelley Franke, LMFT; Lauren Rosen, LMFT  
*Mineral D-G*

YOUNG ADULTS

**IF I COULD DO IT, YOU CAN TOO**  
Cali Werner, LCSW; Caroline K.; Darcy Howell;  
Megan Dailey  
*Mineral B-C*

**HOW BEST TO OCD-PROOF LIFE TRANSITIONS**  
Ryan Judd, LCSW; Megan Dailey; Micah Howe  
*Mineral B-C*

**WORKING ON IT:  
FINDING AND KEEPING JOBS WITH OCD**  
Caroline K.; Marni Jacob, PhD; Micah Howe;  
Thomas Smalley, CSCS  
*Mineral B-C*

PARENTS AND  
FAMILIES

**HOW TO CREATE A THERAPEUTIC HOME ENVIRONMENT**  
Alex Daniels; Natasha Daniels, LCSW  
*Capital 5-7*

**DECREASING ACCOMMODATION DOESN'T HAVE TO BE  
SCARY, IF YOU HAVE A PLAN!**  
Ashley Bramhall, AMFT; Jennifer Lynch, PsyD;  
Jessica Parlor, PsyD  
*Mineral D-G*

**ACCOMMODATION IN OCD: HOW TO BE A PARENT  
WHEN YOUR ADULT CHILD HAS OCD**  
Emily Hemendinger, LCSW, MPH; Rachel Davis, MD;  
Stephanie Lehto, PsyD  
*Centennial C*

HOARDING  
DISORDER

**HOARDING: THE BASICS**  
Randy Frost, PhD; Gail Stekettee, PhD, LICSW  
*Centennial A*

**GAME OF GAMES: TEST YOUR HOARDING BASICS**  
Kiara Timpano, PhD; Carolyn Rodriguez, MD, PhD;  
Christiana Bratiotis, PhD, MSW  
*Centennial C*

**BUILDING ON ASSETS AND SHARING SOLUTIONS:  
AN EXPERIENTIAL WORKSHOP**  
Christiana Bratiotis, PhD, MSW; Jordana Muroff, PhD, LICSW  
*Centennial F*

THERAPISTS  
INTRO

**WHAT ISN'T OCD AND WHY THAT MATTERS**  
Jon Hershfield, LCMFT; Michael Young, MD;  
Jonathan Abramowitz, PhD; S. Evelyn Stewart, MD  
*Centennial G-H*

**SENSORY DYSREGULATION IN OCD AND OTHER  
ANXIETY DISORDERS: A NOVEL APPROACH TO  
TREATMENT**  
Suzanne Mouton-Odum, PhD  
*Centennial F*

**CREATING A FRAMEWORK FOR TREATMENT OF  
OBSESSIVE THOUGHTS**  
Kathleen Rupertus, PsyD; Patricia Perrin Hull, PhD;  
Renae Reinardy, PsyD  
*Centennial G-H*

THERAPISTS  
ADVANCED

**HELP, I'M STUCK! HOW THERAPISTS CAN STAY SHARP,  
CURIOUS, AND EFFECTIVE IN  
TREATMENT-REFRACTORY OCD**  
Jennifer Cullen, PhD; Jennie Kuckertz, PhD; Leslie Shapiro,  
LICSW; Nathaniel Van Kirk, PhD  
*Centennial B*

**ETHICAL CONSIDERATIONS IN THE TREATMENT OF OCD**  
Eric Storch, PhD; Laura Lokers, LMSW;  
Molly Martinez, PhD; Robert Hudak, MD  
*Centennial B*

**FUNCTIONAL ANALYSIS IN PROCESS:  
USING PROCESS-BASED PRINCIPLES TO SUPPORT  
EFFECTIVE OCD TREATMENT**  
Angela Cathey, PhD;  
Katy Rothfelder, LPC-A; Lisa Coyne, PhD  
*Centennial B*

RESEARCH  
TO CLINICAL  
PRACTICE

**STATE OF THE EVIDENCE ON ACT FOR OCD**  
Leila Capel; Michael Twohig, PhD  
*Centennial F*

**OBSESSIVE COMPULSIVE RELATED DISORDER: GENOMES  
IMPACT ON TREATMENT ACROSS ANCESTRY &  
CO-MORBIDITIES**  
James Crowley, PhD; Manuel Mattheisen, MD; Michele  
Pato, MD; Paul Arnold, MD, PhD; Peggy Richter, MD  
*Centennial A*

**NEW CONTRIBUTION TO COGNITIVE BEHAVIOR  
THERAPY FOR OCD**  
Jedidiah Siev, PhD; Jennifer Buchholz, MA;  
Jonathan Abramowitz, PhD; Reuven Dar, PhD  
*Centennial A*

2:15PM–3:45PM

4:00PM–5:30PM

**TALKING TABOO: NORMALIZING THE FORBIDDEN OBSESSIONS**

Kelley Franke, LMFT; Kevin Foss, MFT;  
Laura Yocum, LMFT; Lauren Rosen, LMFT  
*Centennial C*

**STEPPING UP AND STEPPING DOWN: WORKING TOWARDS MORE EFFECTIVE COLLABORATION ACROSS LEVELS OF CARE**

Andrea Guastello, PhD; Melissa Munson, PhD;  
Robert Henderson, PhD; Shanee Toledano, PhD  
*Centennial D*

**DON'T TRY HARDER, TRY DIFFERENT: A (HUMOROUS) STRESS MANAGEMENT APPROACH TO THE TREATMENT OF OCD**

Patrick McGrath, PhD  
*Mineral D-G*

**DO I FIX IT? WHAT ERP REALLY LOOKS LIKE: AN INTERACTIVE EXPLORATION OF OCD EXPERIENCE AND TREATMENT**

Lisa Glessner, LCSW; Toi Hershman, EdD  
*Mineral D-G*

**DO I LAUGH WITH THE SINNERS OR CRY WITH THE SAINTS? A DISCUSSION ABOUT SCRUPULOSITY**

Jedidiah Siev, PhD; Jon Grayson, PhD; Maleeha Abbas, PhD;  
Ted Witzig, Jr., PhD  
*Centennial B*

**STAYING IN THE ZONE: WHEN TO PULL IN DBT ALONGSIDE ERP**

Blaise Aguirre, MD; Jon Hershfield, LCMFT  
*Capital 5-7*

**LET'S TALK ABOUT S.E.X.**

Alegria Kastens, LMFT;  
Chris Trondsen, AMFT, APCC; Genevieve Kales  
*Mineral B-C*

**IT'S LIKE WALKING INTO HOME DEPOT: TOOLS FOR MOTIVATION**

Genevieve Kales; Jacques Esses, MSW; Kyle King;  
Marni Jacob, PhD; Chris Trondsen, AMFT, APCC  
*Centennial F*

**BECOMING AN ERP CO-THERAPIST: A SKILL-BUILDING SESSION FOR PARENTS**

Adam Reid, PhD; Andrea Guastello, PhD;  
Andrew Guzick, PhD; Ashley Ordway, LMHC  
*Centennial G-H*

**RAISING RESILIENCE: 25 TIPS FOR PARENTING YOUR CHILD WITH ANXIETY OR OCD**

Josh Spitalnick, PhD; Marti Munford, LPC  
*Centennial C*

**NAVIGATING TREATMENT CHALLENGES IN HOARDING DISORDER: A WORKSHOP FOR CLINICIANS**

Carolyn Rodriguez, MD, PhD; Jessica Grisham, PhD;  
Lindsay Bacala, MSW, RSW  
*Centennial F*

**MOTIVATIONAL TOOLS FOR FAMILY OF INDIVIDUALS WITH HOARDING DISORDER**

Greg Chasson, PhD  
*Centennial A*

**THE HOW-TOS OF EXPOSURES AND ACCEPTANCE AND COMMITMENT THERAPY**

Julie Petersen, MS; Michael Twohig, PhD  
*Capital 5-7*

**AM I AN ACT THERAPIST OR AN ERP THERAPIST? HOW TO EMBRACE FLEXIBILITY AND INTEGRATE WHAT WORKS**

Amy Jenks, PsyD; Jon Hershfield, LCMFT; Lisa Coyne,  
PhD; Marisa Mazza, PsyD  
*Centennial D*

**GENDER AND SEXUAL ORIENTATION OCD: UPDATED TREATMENT RECOMMENDATIONS THROUGH A JUSTICE-BASED LENS**

Caitlin Pinciotti, PhD; Chad Wetterneck, PhD;  
Zachary Smith, RN; Lauren Wadsworth, PhD;  
Stephanie Pinder-Amaker, PhD

*Centennial G-H*

**HORMONAL IMBALANCES AND OBSESSIVE COMPULSIVE DISORDER: IMPLICATIONS FOR TREATMENT**

Alexander Gorbis, MA; Eda Gorbis, PhD, LMFT  
*Centennial A*

**PROFESSIONAL PLENARY**

**GENDER AND SEXUAL ORIENTATION OCD: UPDATED TREATMENT RECOMMENDATIONS THROUGH A JUSTICE-BASED LENS**

Caitlin Pinciotti, PhD; Chad Wetterneck, PhD;  
Zachary Smith, RN; Lauren Wadsworth, PhD;  
Stephanie Pinder-Amaker, PhD

*Centennial G-H*

See pages 36- 41 for detailed descriptions of each presentation.

- EVERYONE
- LIVING WITH OCD
- PARENTS & FAMILIES
- YOUNG ADULTS
- HOARDING DISORDER
- THERAPISTS
- RESEARCH TO CLINICAL PRACTICE
- Workshops with black outline are eligible for CE/CME credits.

These tracks indicate who the intended audience is. However, all of our presentations are open to everyone.

## SESSION AVAILABILITY

Seating at all workshops, seminars, and lectures is on a first-come, first-served basis.

## 8:00am–9:30am

### OCD Trivia – How Much Do You Know? *Centennial D*

**Ashley Bramhall, AMFT**, *Renewed Freedom Center for Rapid Anxiety Relief*; **Jennifer Lynch, PsyD**, *Renewed Freedom Center for Rapid Anxiety Relief*; **Jenny Yip, PsyD**, *Renewed Freedom Center for Rapid Anxiety Relief*; **Sarah Haider, PsyD**, *GamePlan Therapy*

Like most health conditions, early detection is essential to improved prognosis and treatment outcome. With so much misinformation about OCD in the media, cyberspace, and even within medical institutions, recognizing the symptoms can be challenging. This often leads to misdiagnosis or un-diagnosis by medical and mental health professionals when symptoms don't necessarily fall under the more classic subtypes of OCD. Patients and family members are also often confused or misinformed about evidence-based treatments, insurance coverage, or how best to help the suffering member. In this interactive, fun game, attendees will get answers to all of the FAQs about OCD in a multiple-choice format. Attendees will earn points toward a prize for correctly identifying answers to commonly asked questions.

### How to Create a Therapeutic Home Environment *Capital 5-7*

**Alex Daniels; Natasha Daniels, LCSW**, *ATParentingSurvival.com*

OCD doesn't live in the therapist's office. It comes home and parents have to deal with the bulk of OCD's chaos. In this presentation you will hear from OCD child therapist and mom, Natasha Daniels on the main components needed to create a therapeutic home environment that fosters skills and long-term success. You will also hear from Natasha's 10 year old daughter, Alex, about how she uses that therapeutic environment to manage her OCD and handle new themes as they pop up.

### What Isn't OCD and Why That Matters\* *Centennial G-H*

**Jon Hershfield, LCMFT; Michael Young, MD**, *The Retreat at Sheppard Pratt*; **Jonathan Abramowitz, PhD**, *University of North Carolina*; **S. Evelyn Stewart, MD**, *University of British Columbia*

OCD is diagnosed by the presence of obsessions and compulsions, or more specifically unwanted thoughts, images, and urges and repeated or ritualized strategies for resolving distress around these experiences. However, in many cases, OCD-like symptoms can present alongside or within the context of another disorder and treating only the OCD components may be ineffective or even cause harm. Some mood, thought, developmental, and personality disorders may include unwanted thoughts and rituals as well, requiring a nuanced diagnostic eye. This presentation features psychiatrists and psychotherapists who work in both outpatient and residential settings where these complexities arise. Case examples will be explored where looking beyond the O and the C led to the most effective treatment.

### OCD: Past, Present, and Future Perspectives\* *Mineral D-G*

**Alec Pollard, PhD**, *Saint Louis Behavioral Medicine Institute*; **Charles Mansueto, PhD**, *Behavior Therapy Center of Greater Washington*; **Jon Grayson, PhD**, *The Grayson LA Treatment Center for Anxiety and OCD*; **Jonathan Hoffman, PhD**, *Neurobehavioral Institute*; **Katia Moritz, PhD**, *Neurobehavioral Institute*

OCD treatment is ever-evolving, as are the perspectives of our panelists who together have over 200 years of combined experiences. Discussion topics include how OCD treatment has changed over time, exciting developments in OCD treatment presently, and a vision for OCD treatment in the future. We also plan a 'lightning round' to examine some of the big questions, such as, "How does OCD treatment really work? How can you get the most out of OCD treatment? What makes someone an effective treater of OCD? What does it take to live your best life with OCD? Will OCD ever be cured?" Join us for a thought-provoking and hopeful event (at least until the panelists need a nap...JK).

### DBT Radical Acceptance for OCD\* *Centennial C*

**Beth Brawley, LPC**, *Life Without Anxiety LLC*; **Shanda Curiel, PsyD**, *Allay OCD, LLC*

Often individuals with OCD try to resist uncertainty, possibility, and imperfection, making everyday life hard to navigate. It can feel difficult to accept that living a full life has inherent risks for us all; additionally, OCD tries to twist no- to low-risk situations into feelings of imminent threat. The more you resist something painful, the more it turns to suffering and feels unmanageable. Utilizing DBT skills, we will break this aspirational viewpoint into smaller parts. You'll privately identify your fears at the surface and at the core that seemingly would require a radical shift to overcome. We will assist attendees in this exercise for their specific intrusions. Acceptance does not happen quickly, but it is essential to OCD recovery.

### Hoarding: The Basics\* *Centennial A*

**Randy Frost, PhD**, *Smith College*; **Gail Steketee, PhD**, *LICSW*

This workshop will highlight basic findings from research and practice on hoarding. Descriptions of basic features will include excessive acquisition, difficulty organizing, sorting and letting go of possessions, and clutter in the home. Cross-disciplinary assessment strategies and intervention components will focus on practitioners in mental health, as well as public health, housing, protective services, and first responders. The presenters will discuss basic practice methods to improve client motivation and help clients understand hoarding and gain skills to resolve these and related problems. Cognitive and behavioural strategies for individual and group interventions will be described for mental health and other practitioners and peers.

### State of the Evidence on ACT for OCD\* *Centennial F*

**Leila Capel**, *Utah State University*; **Michael Twhig, PhD**, *Utah State University*

This presentation aims to discuss the current research on Acceptance and Commitment Therapy (ACT) for OCD. Over the last decade, research on ACT for OCD has grown significantly. Research supports that psychological inflexibility plays a role in the distress associated with OCD which makes ACT a logical treatment option for individuals with OCD. This presentation will provide a review of the current research supporting the efficacy of ACT for OCD including trials in the United States and 15 randomized controlled trials in Iran. This presentation will provide an up-to-date review of the empirical support for ACT for OCD.

### Help, I'm Stuck! How Therapists Can Stay Sharp, Curious, and Effective in Treatment Refractory OCD\* *Centennial B*

**Jenifer Cullen, PhD**, *McLean Hospital/OCD Institute*; **Jennie Kuckertz, PhD**, *McLean Hospital*; **Leslie Shapiro, LICSW**, *OCD Institute/McLean Hospital*; **Nathaniel Van Kirk, PhD**, *McLean Hospital*

Despite being a powerful treatment, many patients struggle during ERP. This Q&A discussion is intended for clinicians at all levels of experience who are interested in treating the most challenging cases. The panel will highlight three categories of stuck points, including patient, therapist, and familial issues. Patient-oriented issues include misusing therapeutic strategies to perpetuate experiential avoidance. Additional features that can decrease the effectiveness of ERP, such as unrealistic treatment expectations and a desire to please the therapist, are discussed. Furthermore, despite their best intentions, therapists may unknowingly collaborate in patients' rituals, which can attenuate treatment response. The ways in which patients' families can help or hinder this process will receive special attention given their considerable role in treatment efficacy.

### If I Could Do It, You Can Too *Mineral B-C*

**Cali Werner, LCSW**, *McLean OCD Institute / Houston*; **Caroline K.**; **Darcy Howell, A** *Penny For Your Intrusive Thoughts*; **Megan Dailey**

Although it can be difficult, there is one thing you can never lose when fighting OCD: hope. Hope that recovery is possible, hope that treatment works, hope that, one day, you can live your life free from OCD. In this panel, listen to the OCD stories of four young adults, all of whom faced OCD head on. Hear about the unique problems they overcame, the peaks and valleys of their OCD journey, and where they are now. After, get a chance to ask the speakers questions about the difficulties they faced, and how they overcame. No matter where you are on your journey, these talks will be sure to remind you that hope is always on your side.

### High Schoolers & Families Orientation *Agate A-C*

**Meaghan Cleary, LMHC, R-DMT**, *McLean Hospital/OCD Institute*; **Lisa Coyne, PhD**, *New England Center for OCD and Anxiety*

This orientation will discuss the logistics of the conference and provide an overview of the Teens Room (suggested ages = 14 and older) and all that it entails. Presenters will also answer questions about the IOCDF, specific sessions, and anything else related to the conference.

### Middle Schoolers & Families Orientation *Granite A-C*

**Kat Rossi, LMHC, REAT**; **Denise Egan Stack, LMHC**

This orientation will discuss the logistics of the conference and provide an overview of the Middle Schoolers Room (suggested age range = 12-14yo) and all that it entails. Presenters will also answer questions about the IOCDF, specific sessions, and anything else related to the conference.



**Elementary Schoolers & Families Orientation** Quartz A-BSusan Boaz, *International OCD Foundation*; Madeline Conover, LMHC, REAT

This orientation will discuss the logistics of the conference and provide an overview of the Kids Room (suggested ages = 11 and younger) and all that it entails. Presenters will also answer questions about the IOCDF, specific sessions, and anything else related to the conference.

9:45am–11:15am

**“I Think My Decision-maker is Broken” Navigating Value-Based Decisions from Compulsions** Centennial DAngela Smith, PhD, *Anxiety Specialists of Houston*; Bridget Henry, PhD; Cali Werner, LCSW, *McLean OCD Institute / Houston*; Jelani Daniel, LPC, *University of Houston-Clear Lake*

Individuals with OCD experience overwhelming anxiety and doubt surrounding decisions. Whether you are an individual with OCD or a provider, you have likely been faced with the question “Is this a values-based action or is this a compulsion/avoidance?” The combination of intolerance of uncertainty and underestimation of ability to cope can indeed be paralyzing when faced with a choice, however large or small. The cycle of OCD prioritizes short-term relief, removing the opportunity to learn agency and empowerment. ERP emphasizes decisions based on long-term goals and values. Presenters aim to highlight the struggle in OCD in learning to make decisions, with the aim of increasing values-based actions, decreasing fear-based decisions, and learning to trust oneself to tell the difference.

**The Struggle is Real—Dropping the Struggle and Moving on with Life** Capital 5-7Allyson Guilbert, LCSW, *Mindset Family Therapy*; Annabella Hagen, LCSW, *Mindset Family Therapy*; Christine Black, LCSW, *Mindset Family Therapy*; Jon Case, LCSW, *Mindset Family Therapy*

You may have heard that the problem isn't with the content of OCD, but rather the struggle with the content. What does this mean? Come and learn how to drop the struggle with your thoughts and feelings so that you can live a life composed of what matters to you. Hear stories of those who were able to do this and thrive. Learn skills of how to identify the struggle, identify how it doesn't help, and what can be more helpful in living the way you want, with or without OCD.

**CBT for OCD: An Overview and Research Update for Consumers and Families** Centennial G-HJonathan Abramowitz, PhD, *University of North Carolina*

I will provide an overview of cognitive-behavior therapy (CBT) for OCD, including an update on the latest advances in the field. This will include a brief introduction to exposure, response prevention, ACT, and cognitive therapy. We will discuss how these treatments work and offer a brief review of research findings on their effectiveness. The presentation will emphasize recent developments, such as the application of exposure therapy with couples and families, the use of ACT along with exposure therapy, technology-enhanced CBT, and the inhibitory learning perspective on exposure therapy. Treatments will be described using case illustrations, and attendees will be encouraged to ask questions. The presentation will be geared to consumers with OCD and their families.

**Decreasing Accommodation Doesn't Have To Be Scary, If You Have A Plan!** Mineral D-GAshley Bramhall, AMFT, *Renewed Freedom Center for Rapid Anxiety Relief*; Jennifer Lynch, PsyD, *Renewed Freedom Center for Rapid Anxiety Relief*; Jessica Parlor, PsyD, *Renewed Freedom Center*

You and your loved one have seen an OCD specialist and learned about the effects of family accommodation. You understand what you must do, but you are dreading the fallout. You imagine anger, tantrums, yelling, crying, throwing things, and maybe even physical aggression. But setting boundaries and decreasing accommodation doesn't have to be scary, if you have a plan! In part one of this two-part interactive workshop, attendees will learn how to set boundaries, reinforcement of behaviors, and how to create and implement effective behavior/contingency plans. Part two will give attendees an opportunity to use the skills they have learned to create their own behavior/contingency plan with the assistance of OCD experts.

**Game of Games: Test Your Hoarding Basics** Centennial CKiara Timpano, PhD, *University of Miami*; Carolyn Rodriguez, MD, PhD, *Stanford University*; Christiana Bratotiis, PhD, MSW, *The University of British Columbia*

This interactive session will review hoarding disorder basic information such as diagnosis, symptoms, treatments, and questions and controversies via game format with audience participation format. The co-hosts and other experts in hoarding — including Dr. Randy Frost and Dr. Gail Steketee — will offer in-depth information that is important for ensuring that participants understand the standard of care and the latest information on novel research and treatments, empowering patients and clinicians alike. Thus, this panel is for everyone: patients, family members, and professionals in psychiatry, primary care, and psychology.

**Obsessive Compulsive Related Disorder: Genomes Impact on Treatment across Ancestry & Co-Morbidities\*** Centennial AJames Crowley, PhD, *University of North Carolina at Chapel Hill*; Manuel Mattheisen, MD, PhD, *Dalhousie University*; Michele Pato, MD, *Rutgers University*; Paul Arnold, MD, PhD, *University of Calgary*; Peggy Richter, MD, *Frederick W. Thompson Anxiety Disorders Centre*

The field of genomic analyses and treatment of OCD has been moving forward over the past 5 years. We have looked beyond the OCD diagnosis to comorbid conditions. And, we have begun to look at ancestry differences in diagnosis and treatment. We will start by focusing on OCD and ancestry differences. Then we will present new data regarding the genetic basis of OCD symptoms and subtypes in a large community-based sample of children/adolescents – findings on genetic markers from large-scale GWAS analysis on the genetic relationship between OCD and other (psychiatric) disorders, using structural equation modeling. We will end with a focus on the clinical relevance of OCD genomics on helping predict drug response and tolerability to OCD treatment.

**Sensory Dysregulation in OCD and other Anxiety Disorders: A novel approach to treatment\*** Centennial FSuzanne Mouton-Odum, PhD, *Psychology Houston PC*

Sensory sensitivities can be an underlying feature of OCD. This workshop will provide an overview of sensory processing, sensory dysregulation, and how disruption in the sensory system can contribute to both anxiety or to behaviors that look like anxiety, but are not. Understanding the role of the sensory system and how it can lead to specific behavioral disorders is key and is often the missing piece of the puzzle with difficult cases. Specific attention will be placed on “not just right” OCD, sensory-based issues involving disgust, misophonia, and other anxiety disorders that can be heavily impacted by sensory dysregulation. A novel treatment approach for individuals who have underlying sensory regulation issues will be presented.

**Ethical Considerations in the Treatment of OCD\*** Centennial BEric Storch, PhD, *Baylor College of Medicine*; Laura Lokers, LMSW, *Anxiety and OCD Treatment Center of Ann Arbor*; Molly Martinez, PhD, *Specialists in OCD & Anxiety Recovery (SOAR)*; Robert Hudak, MD, *Western Psychiatric Institute and Clinic*

Evidence-based treatment of OCD can put the patient and provider together in situations that challenge the expectations of traditional care. The unconventional nature of ERP (and the discomfort that accompanies it) make many clinicians & patients reluctant to practice it, despite strong research demonstrating its efficacy. At times, treating OCD can look and feel scary, bizarre, and out-of-bounds; especially to the untrained observer. As we grapple with uncertainty in the clinical context, patients and providers alike must contend with potential ethical conflicts & uncertainties inherent in our work together. In this informal question-and-answer style symposium, we will discuss challenging ethical dilemmas that arise as we extend outside our comfort zones in providing cutting edge treatment for OCD.

**How Best to OCD-Proof Life Transitions** Mineral B-CRyan Judd, LCSW, *McLean OCD Institute at Houston*; Megan Dailey; Micah Howe

Young adults are always on the move, changing their address and living arrangements more than any other group of people. Unfortunately, OCD likes to use these changes as opportunities to make new rules and cause chaos before you have a chance to settle in. Not in our house! In this session, hear from a panel of a clinician and two young adults on how to OCD-Proof life transitions — ways to keep your OCD quiet as you change pieces of your life. After learning, you can try out the suggested strategies by discussing what to look out for with your own OCD when things start to change in small discussion groups.

## Mining Values for Courage *Agate A-C*

**Ginny Fullerton, PhD**, *Capital OCD & Anxiety Practice*; **Luke Collier, PsyD**, *Capital OCD & Anxiety Practice*; **Thien-An Le, PhD**, *Capital OCD & Anxiety Practice*

Knowing and connecting with our values helps all of us to face challenges, progress toward our goals, and be our best selves. All too often, OCD can act like an overpowered boss and get in the way of valued living. In this session, attendees are invited to discover and practice valued ways of being in the challenge of overcoming OCD. Presenters will begin the experience with a full-audience warm-up and then divide into smaller breakout groups for interactive exercises using props, paper, and imagination. Attendees will have opportunities to reflect, just be, share, and prepare to move forward, with values sourcing the journey.

## Name That Exposure! *Granite A-C*

**Marni Jacob, PhD**, *Jacob Center for Evidence-Based Treatment*; **Rebecca Schneider, PhD**, *Emory School of Medicine, Department of Psychiatry and Behavioral Sciences*; **Kara Meyer, PhD**

Join us to learn how to become your own therapist, including how to develop exposures for any new OCD symptoms that might arise! Group leaders will propose a variety of OCD symptom presentations, and participants will develop appropriate exposure hierarchies to challenge OCD. Youth will become skilled at identifying various ways to fight back against OCD!

## Unhook Your Thoughts!: A Cognitive Defusion Workshop for Kids *Quartz A-B*

**Amy Jenks, PsyD**, *Bay Area OCD and Anxiety Clinic*; **Amy Mariaskin, PhD**, *Nashville OCD & Anxiety Treatment Center*; **Cassie Marzke**, *A Penny for Your Intrusive Thought*; **Lisa Coyne, PhD**, *New England Center for OCD and Anxiety*

Does your brain ever feel like it's made out of velcro or covered in honey? Weird or scary thoughts come up and then — BAM! — they're stuck inside your head playing over and over? OCD can make this pretty tough, but we have some tools to help you unhook from them. This workshop will use creative, hands-on techniques from Acceptance and Commitment Therapy to help kids see that their thoughts are less powerful than they seem. After a brief conversation about sticky brains, we'll split kids up into three groups and have them visit our creative unhooking stations, which will use art, games, and a whole lot of silliness to help kids see their thoughts differently.

## 12:30pm–2:00pm

### The Cost of Recovery: Maximizing Your Insurance Benefits to Cover OCD Treatment *Centennial D*

**Felice Becker**; **Fred Penzel, PhD**, *Western Suffolk Psychological Services*; **Gabriela Cox**; **Molly Martinez, PhD**, *Specialists in OCD & Anxiety Recovery (SOAR)*

Did you know that, by law, insurance companies must offer patients with OCD coverage for seeing a therapist that specializes in OCD? If there are no OCD providers in-network with an insurance plan, in most cases, patients have the right to have specialist care covered under their in-network benefits. This interactive workshop will be an empowering learning opportunity for patients and therapists alike. We will walk consumers and families through the labyrinthine maze of knowing your rights, navigating insurance, and communicating effectively to maximize your reimbursement. We will help therapists understand their options in working with insurance. All involved will be encouraged to advocate for patient rights in order to expand affordability of and access to the best available OCD treatment.

### OCD Rebuttals *Capital 5-7*

**Jon Hershfield, LCMFT**, *Shepard Pratt*; **Michael Heady, LCPC**, *Anxiety and Stress Disorders Institute of Maryland, LLP*; **Michelle Massi, LMFT**, *Anxiety Therapy LA*; **Shmuel Fischler, LCSW-C**, *CBT Baltimore*

It is no secret how OCD uses creative tactics baiting one into un-winnable debates. OCD cloaks itself with logic, rationale, and understandable questions. The OCD sufferer and their loved ones are challenged identifying if the argument is coming from OCD and developing a helpful response. Utilizing the combined experience of the panelists this session will explore common OCD 'rebuttals'. Such questions as 'Where do I draw the line on risk-taking?' and 'If a normal person won't wish death on their loved ones, why should I?' will be addressed. Clinician and OCD sufferer alike will learn how to identify these recurring OCD arguments and how to better respond without falling into a pattern of reassurance.

## Creating a Framework for Treatment of Obsessive Thoughts\* *Centennial G-H*

**Kathleen Rupertus, PsyD**, *The Anxiety and OCD Treatment Center, LLC*; **Patricia Perrin Hull, PhD**, *OCD and Anxiety Treatment Center of Houston*; **Renae Reinardy, PsyD**, *Lakeside Center for Behavioral Change*

Developing effective exposures for obsessive thoughts is an essential tool in the fight against OCD. This workshop will present a variety of exposure techniques including script writing, the use of trigger words and phrases, the incorporation of visual cues, and how to combine these approaches to achieve favorable treatment outcomes. Case examples will illustrate how to apply these techniques to specific obsessive compulsive themes such as contamination fears, harm thoughts, sexual obsessions, religious concerns, and perfectionism. Participants will then break into smaller groups where presenters will answer questions and facilitate personalized discussions tailored to the smaller groups' interests and case examples.

## Turning Triggers into Exposures: Leaning In and Practicing Response Prevention in Recovery *Mineral D-G*

**Amy Mariaskin, PhD**, *Nashville OCD & Anxiety Treatment Center*; **Chris Pursell, LMSW**, *Nashville OCD & Anxiety Treatment Center*; **Kelley Franke, LMFT**, *The Center for OCD*; **Lauren Rosen, LMFT**, *Center for the Obsessive Mind*

In Exposure and Response Prevention (ERP), exposures are often viewed solely as actions we go out of our way to perform. Have Harm OCD? Hold a knife. Have Relationship OCD? Watch a rom-com. However, daily life provides natural exposure opportunities with every unanticipated trigger. Further, these spontaneous exposures are often even more challenging than the planned ones. This presentation will focus on recognizing "passive" exposures and embodying an "exposure mindset" in the face of triggers. It will explore why response prevention secondary to passive exposures is key to attaining and maintaining recovery. Ultimately, this presentation's focus on passive exposures and subsequent response prevention aims to support the most important goal of ERP: getting you back to the business of living.

## Accommodation in OCD: How to Be a Parent When Your Adult Child has OCD *Centennial C*

**Emily Hemendinger, LCSW, MPH**, *CU Anschutz*; **Rachel Davis, MD**, *CU Anschutz*; **Stephanie Lehto, PsyD**, *University of Colorado*

Navigating your relationship with an adult child with OCD can be difficult, as your child is able to make their own decisions, may or may not live with you or with someone else, and may be more oppositional or dependent than other adults, leading to tension in the relationship. As a parent it is essential to reduce or limit accommodation and learn to support your child while tolerating your own distress. This presentation will provide strategies to reduce accommodations, maintain effective boundaries, and advocate for your child.

## New Contribution to Cognitive-Behavior Therapy for OCD\* *Centennial A*

**Jedidiah Siev, PhD**, *Swarthmore College*; **Jennifer Buchholz, MA**, *University of North Carolina at Chapel Hill*; **Jonathan Abramowitz, PhD**, *University of North Carolina*; **Reuven Dar, PhD**, *Tel Aviv University*

This symposium will describe new contributions to the psychological treatment of OCD. Jonathan Abramowitz will focus on the inhibitory learning approach to exposure and response prevention, which sees obsessional fear as resulting from conditioning experiences, and compulsive rituals as reinforced by the reduction in fear they engender. Jennifer Buchholz will describe OCD treatment from an Acceptance and Commitment Therapy perspective, emphasizing the importance of promoting psychological flexibility and openness to experience. Jedidiah Siev will describe the Emotional Processing Theory and its implications for exposure therapy for OCD. Finally, Reuven Dar will present a new internet-based treatment program for OCD which is designed to overcome the many impediments to the dissemination of CBT for people with OCD.

## Building on Assets and Sharing Solutions: An experiential workshop *Centennial F*

**Christiana Bratiotis, PhD, MSW**, *The University of British Columbia*; **Jordana Muroff, PhD, LICSW**, *Boston University*

During this workshop participants are invited to interact with the presenters and each other while applying specific CBT for hoarding skills. Using Frost & Steketee's model for understanding hoarding, we will focus on decision-making for sorting, discarding, and organizing possessions. Experiential activities will include problem solving, thought-listing, and considering advantages and disadvantages. We'll address common barriers to sorting and discarding, including strong emotions and reinforced thoughts and behavioral patterns. The role of in-home supportive coaches as facilitators for sorting and discarding will be discussed. [Participants are encouraged to bring a small bag of their own items for practice during the workshop].

## Functional Analysis in Process: Using Process-Based Principles to Support Effective OCD Treatment\* *Centennial B*

**Angela Cathey, PhD**, *Better Living Center for Behavioral Health*; **Katy Rothfelder, LPC-A**, *Austin Anxiety and OCD Specialists*; **Lisa Coyne, PhD**, *New England Center for OCD and Anxiety*

The gold standard treatment of exposure and response prevention for OCD has much to teach us about the value of process-based or functional analytic conceptualizations of whole person/environment treatment. Yet, when functional analysis is not performed contextually and continuously, it fails to capture the experiences of the whole person, often leading to restricted patterns of behavior change. As clinicians, developing a behavioral, process-based experiential framework leads us not only to behavior change, but to compassion and connection with the humans we serve. We will provide a simple, but effective behavioral framework to support clinicians in developing a flexible, adaptive, and expansive view of their practice that extends far beyond the session space.

## Working on It: Finding and Keeping Jobs with OCD *Mineral B-C*

**Caroline K.**; **Marni Jacob, PhD**, *Jacob Center for Evidence-Based Treatment*; **Micah Howe**; **Thomas Smalley, CSCS**

When asked as a kid what you wanted to be when you grew up, it's doubtful that any of us factored OCD into the mix. Unfortunately, OCD can make the workforce feel daunting and brings with it a host of new challenges—just as with any other part of our lives. This session will have a frank discussion of what challenges OCD may present in finding a job and building a career, as well as present tips on combating these potential challenges so as not to let OCD get in the way of career goals. After the presentation, participants will break out into groups to discuss challenges they are having with peers, and how they can overcome them!

## Back to Basics: Exploring ERP *Agate A-C*

**Amanda Petrik-Gardner, LCPC**; **Jenna Overbaugh, LPC**

This workshop breaks down Exposure & Response Prevention (ERP), the recommended treatment for Obsessive Compulsive Disorder. The rationale behind ERP will be discussed, while assisting participants on identifying their goals. Participants will learn common components of treatment, including building a hierarchy, rating their Subjective Units of Distress (SUDS), engaging in effective exposures, and strategies to reduce compulsions.

## Superhero Therapy: Superheroes, Comicbook Characters, and Other Fictional Friends Can Help with OCD *Granite A-C*

**Adam Reid, PhD**, *CBTeam*; **Jason Elias, PhD**, *CBTeam*; **Keith Klein, PhD**, *CBTeam*; **Murron O'Neill**, *CBTeam*; **Theresa LaPuma, PhD**, *CBTeam*

Have you ever wanted to be a superhero? We can teach you how! Superhero Therapy (Scarlet, 2021) incorporates characters from popular culture, including superheroes and other characters from books, movies, TV shows and video games to help us learn how to become our own superhero as we overcome the challenges of OCD. Led by our team of expert OCD clinicians from CBTeam in Boston, we look forward to the chance to discuss different characters that you may or may not know and think about how we can be just like them as we cope with OCD and engage in exposure therapy. Come have fun with us as we TRANSFORM into superheroes and practice fighting OCD together.

## BAM! POW! ZAP! Create Your Own OCD Superhero *Quartz A-B*

**Amy Jenks, PsyD**, *Bay Area OCD and Anxiety Clinic*; **Cassie Marzke**, *A Penny for Your Intrusive Thought*

In this fun interactive workshop, kids will learn about their brain and their OCD Villain. Kids will have the opportunity to learn about the many different types of OCD Villains and feel that they are not alone. Kids will also learn about OCD Superheroes and create their own with art materials. Group leaders will help kids identify the superpowers that will help them outsmart their OCD Villains and smash them. Parents are welcome to observe and learn with kids.

## 2:15pm–3:45pm

## Am I an ACT Therapist or an ERP Therapist? How to Embrace Flexibility & Integrate What Works\* *Centennial D*

**Amy Jenks, PsyD**, *Bay Area OCD and Anxiety Clinic*; **Jon Hershfield, LCMFT**; **Lisa Coyne, PhD**, *New England Center for OCD and Anxiety*; **Marisa Mazza, PsyD**, *choicetherapy*

Both ACT and ERP have been shown to be effective when it comes to OCD. It's easy to get caught up in what is the "right" treatment approach. What if we focused instead on broadening our own repertoire in service of providing flexible and life enhancing treatment to our clients? In this workshop we will explore common barriers to learning and integrating ACT and ERP. You will hear four OCD experts with various backgrounds share their personal stories of how they navigated this process. This workshop will include discussion and a live demonstration.

## The How-Tos of Exposures and Acceptance and Commitment Therapy\* *Capital 5-7*

**Julie Petersen, MS**, *Utah State University*; **Michael Twohig, PhD**, *Utah State University*

There is growing support for the use of Acceptance and Commitment Therapy (ACT) as a treatment for obsessive compulsive disorder (OCD), particularly in conjunction with exposure and response prevention (ERP). This workshop will present the basics for incorporating ACT skills and concepts into exposure therapy for OCD. We will present the rationale and research behind ACT and exposure. Basic metaphors and skills from ACT-based exposure practices will be explained and demonstrated. Lastly, problem-solving and tips and tricks for incorporating ACT-based exposures into clinical practice will be reviewed.

## Becoming an ERP Co-therapist: A Skill-building Session for Parents *Centennial G-H*

**Adam Reid, PhD**, *CBTeam*; **Andrea Guastello, PhD**, *University of Florida*; **Andrew Guzick, PhD**, *Baylor University*; **Ashley Ordway, LMHC**, *University of Florida*

This workshop will help parents support their children as they participate in exposure and response prevention (ERP) therapy. We will discuss how to use evidence-based parenting strategies that will maintain a positive parent-child relationship, support children as they face their fears, optimize learning, and minimize accommodation of compulsions or avoidance behaviors. Additionally, we will discuss ways parents can manage their own emotional reactions to bring their best supports to their child. The workshop will provide guidelines towards accomplishing these goals and will give parents an opportunity to practice these skills in smaller groups with feedback from the panel.

## Don't Try Harder, Try Different: A (Humorous) Stress Management Approach to the Treatment of OCD\* *Mineral D-G*

**Patrick McGrath, PhD**, *NOCD*

If I have seen anything over the years of treating OCD, it is a consistent attempt of people with OCD trying harder and harder to get rid of their OCD through the use of safety behaviors (Avoidance, Reassurance Seeking, Distraction, Substance Use, or Compulsions) instead of trying to do something different, such as response prevention. Join me as I walk you and your friends and family through seven common themes to look for that you can start to change TODAY. Watch out for perfection, beware of all of the can't's, and stop shoulding all over the place. Let's pull the curtain back on OCD and show that it is not as scary as it tries to make itself seem.

## Talking Taboo: Normalizing the Forbidden Obsessions\* Centennial C

**Kelley Franke, LMFT**, *The Center for OCD*; **Kevin Foss, MFT**, *The California OCD and Anxiety Treatment Center*; **Laura Yocum, LMFT**, *The OCD Center of Los Angeles*; **Lauren Rosen, LMFT**, *Center for the Obsessive Mind*

When OCD attaches to taboo content it can drive the sufferer into further isolation for fear of what others might think and say if they disclose their feared thoughts. This can interfere greatly with the treatment and recovery process. Presenters will identify common taboo subtypes of OCD and roadblocks. Participants will be provided worksheets and concrete skills and exercises to help eradicate shame and empower the sufferer by separating themselves from their OCD. Presenters will facilitate small break-out groups where participants have an opportunity to practice defusion skills. This is a no-pressure environment meant to provide sufferers a safe place to speak the unspeakable, taking back control from OCD and connecting with others living with similar experiences.

## Hormonal Imbalances and Obsessive compulsive Disorder: Implications for Treatment\* Centennial A

**Alexander Gorbis, MA**, *The Westwood Institute for Anxiety Disorders*; **Eda Gorbis, PhD, LMFT**, *The Westwood Institute for Anxiety Disorders*

The research literature on obsessive compulsive disorder (OCD), both from the past and the present, does not establish a clear cause of obsessive compulsive symptoms. However, recent research from the past ten years has been able to identify multiple environmental and biological factors that could put people at risk of developing symptoms. This presentation will focus on hormones as a significant factor in the activation and exacerbation of OCD in women. It will showcase how hormones play a critical role in the brain, and orchestrate the rest of the organs in the body. It will also cover clinical cases documented by the Westwood Institute for Anxiety Disorders and how the psychopathology of hormonal imbalances can inform necessary treatment protocols and research practices.

## Navigating Treatment Challenges in Hoarding Disorder: A Workshop for Clinicians\* Centennial F

**Carolyn Rodriguez, MD, PhD**, *Stanford University*; **Lindsay Bacala, MSW, RSW**; *OCD Centre of Manitoba*; **Jessica Grisham, PhD**

Hoarding disorder, characterized by difficulty discarding possessions and accumulation of clutter, prevents normal use of the living space and causes distress. Hoarding disorder also causes significant public health consequences, including fire hazards, unsanitary living conditions, and structural damage, which may violate building, fire, or property maintenance codes and lead to eviction and homelessness. Treatment challenges for clinicians vary widely and may include insight and motivation, particularly when an individual has difficulty with recognition of the negative consequences of hoarding behaviors. Experts from fields of psychology, psychiatry, and community interventions will discuss ways to navigate these challenges include community-based approaches, peer and family support, use of established treatments which can involve motivational interviewing, and personalized intensive case management.

## Do I Laugh with the Sinners or Cry with the Saints? A Discussion About Scrupulosity Centennial B

**Jedidiah Siev, PhD**, *Swarthmore College*; **Jon Grayson, PhD**, *The Grayson LA Treatment Center for Anxiety and OCD*; **Maleeha Abbas, PhD**, *Evidence Based Treatment Centers of Seattle*; **Ted Witzig, Jr., PhD**, *Apostolic Christian Counseling and Family Services*

This presentation is a therapist-audience dialogue about scrupulosity, structured as a Q&A about treatment obstacles, and an open conversation about unique challenges when OCD is entangled with religion or morality. Sample issues include: What role does religion have vis-a-vis OCD? How can someone with OCD be religious but not scrupulous? Can one engage in exposures without violating religious law? How can scrupulous individuals interact with clergy in a way consistent with their values and still healthy in terms of OCD? And what about secular, moral scrupulosity?

## Let's Talk About S.E.X Mineral B-C

**Alegra Kastens, LMFT**, *Center for OCD, Anxiety, and Eating Disorders*; **Chris Trondsen, AMFT, APCC**, *The Gateway Institute*; **Genevieve Kales**

SEX. The dreaded word in our OCD society. The thoughts and emotions that can come along with trying to be ourselves and enjoy the experience can end the mood. This talk will be brought to you by a panel of lived experiences in the dating and sex scene and will incorporate all walks of life and sexual experiences. Panelists will discuss their OCD triggers involving dating and marriage, and experiences they've had regarding sex, love, and intimacy. We will discuss everything from contamination fears, pregnancy obsessions, sexual orientation, anxiety, and medication reducing sex drive in hopes giving everyone that happy ending. The presentation will be followed by a Q&A, allowing attendees the opportunity to ask their own questions in a safe space.

## Supportive Siblings: Creating "Assistant OCD Coaches" in Families Agate A-C

**Krista Reed, LCSW**, *A Peaceful Balance, LLC*

This session is for siblings both in the middle school track and the high school track. Pediatric OCD therapists will work with parents to become coaches for their children during treatment, but what about the other children in the household? Children as young as 5 can learn, through empathetic and supportive techniques, ways to encourage their sibling with their recovery. Siblings can inadvertently accommodate the OCD or even become part of the obsession themselves (e.g. fear that death will come to them if the sibling with OCD does not perform compulsion).

## I'll Be There for You: A Mentorship Workshop for Middle Schoolers and High Schoolers Granite A-C

**Caroline K.; Emily Melrose**

This session is for youth with OCD in both the middle school track and the high school track

Middle school is hard enough, the introduction to lockers and changing for gym class, we've all been there. Adding OCD to the mix only makes middle school that much more difficult. During this workshop we invite high schoolers and middle schoolers with OCD to attend and engage in an interactive, hands-on workshop with one another. Our high school students will get the opportunity to provide words of wisdom and mentorship opportunities to middle school students who may feel the need for a guiding hand as they transition into middle school or are about to transition into high school, all while struggling with OCD. Join us for the opportunity to collaborate, learn, and receive from other peers with OCD.

## Calling All Mystery Explorers Quartz A-B

**Emily Hoppe, PMHNP-BC**, *Johns Hopkins School of Nursing*; **Nicole D'Adamo, LCSW-C**, *Kennedy Krieger Institute*

OCD has been called the doubting disorder because it is always looking for certainty but never finding it. This search for certainty can drive children's compulsions and gives OCD more power. Children can take back their power by learning to accept uncertainty and doubt, increasing their feelings of bravery and promoting flexibility and confidence. In this group, Mystery Explorers will have the opportunity to engage in interactive activities to experiment with tolerating uncertainty and learning that mystery can be fun. The session will conclude with a guided reflection, and members will walk away with their own Mystery Explorer badge.

## 4:00pm–5:30pm

### Stepping Up and Stepping Down: Working Towards More Effective Collaboration Across Levels of Care\* Centennial D

**Andrea Guastello, PhD**, *University of Florida*; **Melissa Munson, PhD**, *University of Florida*; **Robert Henderson, PhD**, *Rogers Behavioral Health - Atlanta*; **Shanee Toledano, PhD**, *Rogers Behavioral Health - Atlanta*

Individuals with OCD have increasing options for entering treatment at different levels of care, ranging from weekly outpatient sessions to residential settings. While the diversity of settings and treatment formats has improved access to care, patients, families, and treatment providers often struggle to navigate the various systems. The presenters in this session have experience working at multiple levels of care including weekly outpatient, intensive outpatient, partial hospitalization, and residential. Topics discussed will include: identifying the most appropriate level of care, understanding how treatment goals and length of stay are determined across settings, and how providers can collaborate and patients can advocate to improve continuity of care.

## Staying in the Zone: When to Pull in DBT Alongside ERP *Capital 5-7* **Blaise Aguirre, MD, McLean Hospital; Jon Hershfield, LCMFT, Shepard Pratt**

The traditional understanding of distress when doing exposure and response prevention is that what goes up, must come down. This is true, but what happens when distress goes up for some people is that it does more than just increase in intensity before peaking and tapering off. For some, higher levels of distress not only occur more quickly, but expand into self-loathing, dissociation, and urges to self-harm. If ERP is meant to be a learning-based treatment, one must stay in a state of activation where one is still capable of learning! This presentation by an ERP specialist and a DBT specialist addresses strategies for utilizing both forms of CBT concurrently for those most susceptible to overwhelm.

## Plenary: Gender and Sexual Orientation OCD: Updated Treatment Recommendations Through a Justice-Based Lens\* *Centennial G-H*

**Caitlin Pinciotti, PhD, Rogers Behavioral Health; Chad Wetterneck, PhD, Rogers Behavioral Health; Zachary Smith, RN, University of Colorado Anschutz Medical Campus; Lauren Wadsworth, PhD, Genesee Valley Psychology; Stephanie Pinder-Amaker, PhD, McLean Hospital**

Sexual orientation (SO) and gender-themed OCD has historically been conceptualized and treated like other OCD presentations—by downplaying the obsessional content and designing exposures to fears that arise regardless of their likelihood or irrationality. Despite most individuals with these symptoms denying any overtly negative attitudes toward LGBTQ+ people, many of their SO- and gender-themed ERP exercises incorporate harmful stereotypes about LGBTQ+ people, which only serve to reinforce these problematic associations. Because of the implications of minority stress among LGBTQ+ individuals, we argue that a critical re-examination and updating of treatment practices is needed in an effort to ensure that the LGBTQ+ community—clients, providers, and society—are not being further marginalized. Updated recommendations through a critical, justice-based lens will be presented.

## Do I Fix It? What ERP REALLY Looks Like: An Interactive Exploration of OCD Experience and Treatment\* *Mineral D-G*

**Lisa Glessner, LCSW, The Center for OCD & Anxiety, LLC; Toi Hershman, EdD**

Toi Hershman has suffered from severe OCD for 35 years. In this session, she and her therapist, Lisa Glessner, will demonstrate what ERP looks like in an honest and humorous context. They will engage the audience in an interactive session involving questions and audience participation where audience members will experience the reality of OCD treatment, helping them understand OCD from both perspectives. They will discuss nuances of types of OCD, how subtypes can be misleading, what neuroscience says about OCD, and how to properly tackle this dreadful disorder. Treating OCD is difficult for a clinician because each patient is unique. Toi and Lisa will demonstrate how unconventional effective OCD therapy can appear in a serious but light-hearted manner.

## Raising Resilience: 25 Tips for Parenting Your Child with Anxiety or OCD *Centennial C*

**Josh Spitalnick, PhD, Anxiety Specialists of Atlanta; Marti Munford, LPC, Anxiety Specialists of Atlanta**

Watching our children suffer from anxiety/OCD is confusing, frustrating, and painful. Every caregiver has wondered if they are the cause of their child's struggles. Yet, there are key ingredients to effectively treat pediatric anxiety/OCD, whether your child sees a therapist or not. This presentation will be exploring the 25 tips to raising a resilient child who struggles with anxiety/OCD, emphasizing parent-focused interventions (Leibowitz et al., 2013; Peris & Piacentini, 2012) and reducing family accommodations (Garcia et al., 2010; Storch et al., 2010). These tips offer an empowering framework and concrete actions that gives you, your child, and your family the best chance at facing fears, tolerating distress, living with uncertainty, and taking steps that are aligned with your families' values.

## Motivational Tools for Family of Individuals with Hoarding Disorder *Centennial A*

**Greg Chasson, PhD, Illinois Institute of Technology**

The current session introduces Family-As-Motivators (FAM) Training, which was designed exclusively for empowering family members with the goal of increasing treatment-seeking behavior and readiness among individuals with hoarding disorder (HD), as well as increasing the wellbeing of family members. FAM Training is a 10-session, manualized training program that consists of four modules: Psychoeducation, Motivational Interviewing, Harm Reduction, and Family Accommodation Prevention. An overview of FAM Training will be provided, and time will also be reserved for answering audience questions pertaining to FAM Training and, more generally, family support and intervention for HD. The tools were designed with family in mind, but they can easily be generalized to other loved ones (e.g., friends).

## It's Like Walking Into Home Depot - Tools For Motivation *Centennial F*

**Genevieve Kales; Jacques Esses, MSW, The Gateway Institute; Kyle King; Marni Jacob, PhD, Jacob Center for Evidence-Based Treatment; Chris Trondsen, AMFT, APCC, The Gateway Institute**

Exposure therapy is hard — there is no way around that. No matter how bad we may want to stand up to OCD, finding the motivation to face fears and tolerate uncertainty can be challenging. In this interactive workshop, attendees will break out into groups and move between different stations, learning a different strategy that can be used to find the necessary motivation to face OCD at each. After having the chance to cycle between each station, attendees will come back together for a Q&A session on motivation with OCD experts

## How Do I Become More Willing to Do My Exposure Homework? *Agate A-C*

**Angela Bello; Adam Reid, PhD, CBTeam**

Since OCD often focuses on what is important to the individual (e.g., family, safety), it's common for youth to be asked to do exposures that they may think are too dangerous because of a mix of logical and illogical fears about what might happen. This is the greatest challenge in exposure work- finding the willingness to do exposures despite those "what ifs." In this support group, Dr. Adam Reid and Angela Bello will provide a professional and personal perspective on how to find the willingness to do exposures when they feel too risky. Both will facilitate discussion within the group using Angela's personal story navigating challenging exposures that touch on contamination/food allergy fears, perfectionism, relationship OCD, and other OCD dimensions.

## ERP Scavenger Hunt *Granite A-C*

**Amelia Serine, PsyD, The Anxiety and OCD Treatment Center, LLC; Brian Ashenfelter, PsyD, The Anxiety and OCD Treatment Center, LLC; K. Peer Mugnier, PsyD, The Anxiety and OCD Treatment Center, LLC; Kathleen Rupertus, PsyD, The Anxiety and OCD Treatment Center, LLC; Katie Manganello, The Anxiety and OCD Treatment Center, LLC**

In this interactive workshop, participants will face challenges and have FUN working in teams to complete a scavenger hunt, doing ERP along the way. Participants will have the opportunity to set and accomplish their own goals as well as supporting others as they pursue theirs.

## Fighting OCD with Art *Quartz A-B*

**Cassie Marzke, A Penny for Your Intrusive Thought; Darcy Howell, A Penny For Your Intrusive Thoughts; Gabriela Holliman Lopez; Max Wilson**

Being a kid with OCD is tough! Take a break from the busyness of the conference—create some art and chat with other kids who know what you're going through—all while creating. Attendees can choose to create their own art piece using a variety of materials, or complete a structured art activity. After the session is over, pick up your goody bag! Supplies are provided. Wear clothes that can get messy and get ready to play!

# FRIDAY EVENING

6:00pm–7:30pm

## OCD Creative Bullet Journal - No Creativity Needed Centennial D

**Debbie Kolbrener, LPC, DKC Counseling - Private Practice; Teagan Miller**

Explore your creative side or even your non-creative side with the development of an Inspiration Journal. Make individual pages to represent your progress with OCD, your skills, your emotions, what gets you through difficult times and everything else you may need through your OCD recovery, relapse or where you are in the moment. This activity will help to develop coping skills and inspire recovery in a fun and non-threatening way. NO CREATIVITY NEEDED — just an open and fun attitude. This activity will use paper, markers, paint, and stencils. The journal can be in a book format, a poster, or a single page.

6:00pm–7:30pm

## IOCDF's Got Talent: Season 4 Agate A-C

**Rena Reinardy, PsyD, Lakeside Center for Behavioral Change**

*All Ages Kids Event* After a brief delay in production, we are bringing back our annual IOCDF's Got Talent event! Did you learn any new skills recently? Now is your time to show off what you've got! If you know karate, dance, comedy, sing or play an instrument (really any talent) we want to see you do your thing! This event is for you to share your gift with others or come and support your new friends! So bring your creativity and positive attitude for this super fun event. There will be prizes!

state, and we will consider what successful treatment for this dual diagnosis feels and looks like. This group is open to people with these disorders, family and friends, and mental health practitioners.

## Support Group for Self-Harm OCD Granite A-C

**Cassie Marzke, A Penny for Your Intrusive Thought; Jennifer Park, PhD, Rogers Behavioral Health - San Francisco East Bay**

Individuals with harm-to-self OCD have intrusive and unwanted thoughts about self-harm and suicide. These thoughts are often mistaken for suicidal ideation, which can be frightening for individuals, families, and providers. This support group provides a space for people to share their experiences and best practices.

## Perinatal OCD Support Group Centennial F

**Michelle Malloy, MFT, PMH-C; Allison Livingston**

This group is intended for everyone affected by Perinatal OCD. This is an opportunity to connect with others with a shared experience. Group goals are to provide education and support for obsessions and compulsions and provide an open discussion regarding the stress that accompanies the adjustment to pregnancy and postpartum life. This group is led by Michelle Malloy MFT, PMH-C, a Certified Perinatal Mental Health Specialist who has worked with OCD for over 20 years and Allison Livingston, an advocate who experienced Perinatal OCD.

## Work/Career Advice and Support Group Centennial B

**Sarah Chorley, PhD, Metropolitan State University of Denver**

This support/advice group is hosted by a Certified Career Services Provider and Professor of Communication who researches OCD in the workplace. This group is for you if you would like to talk about issues you've faced in your career or your workplace and would like support and advice from others who are going through the same things.

## Baby Psychologist or Expert? Support Group for New OCD Therapists Mineral B-C

**Bridget Henry, PhD; Melissa Fasteau, PsyD, The Conative Group**

One would think that when we complete our graduate programs, we will feel confident and ready to begin independent practice; however, how many of us actually feel like we know what we are doing? Raise your hand if you struggle with the impostor syndrome (raises hand). This presentation will focus on exploring the impostor syndrome, particularly how it impacts newly licensed therapists/ those new to treating OCD. We will summarize relevant literature, explore the impact of variables within and outside of the OCD community, and share from our own experiences to help facilitate an open discussion aimed at normalizing this experience, as well as equipping therapists new to treating OCD on how to navigate their own professional insecurities or doubts.

## Be(ad) Kind to Yourself: Self-Compassion Jewelry Granite A-C

**Lisa Giuffre, Not Alone Notes; Molly Fishback, Not Alone Notes**

Self Compassion is the ability to treat yourself with kindness, understanding, and acceptance. Join members of the IOCDF Creatives SIG (special interest group) for an evening activity where you can take a break and embrace your creative side. Come create your own jewelry with mantras that remind you to take care of yourself. Supplies will be provided!

8:00pm–9:30pm

## Road to Recovery Tour - COVID Edition Centennial D

**Elizabeth McIngvale, PhD, LCSW, McLean OCD Institute / Houston; Jon Grayson, PhD, The Grayson LA Treatment Center for Anxiety and OCD**

We're back - repeating this experiential workshop for the 20th anniversary year. This will be the COVID edition tour, meaning the excitement will still follow COVID protocols. There will be a brief presentation about tonight's tour/"virtual camping" that will focus on inspiring you to risk getting better. Following this, participants, patients, family members, and professionals will go on a field trip throughout the city in which participants will experience the exhilaration of conquering OCD fears in a group that goes beyond your imagination. Everyone will be encouraged to support and help one another, but participants will only do what they choose to do. The surprise will be in how much more you will choose!

6:00pm–7:30pm

## OCPD Support Group Capital 5-7

**Karen Swanay LPC, LMHC, LPC-MHSP**

A support group for those with OCPD and their families. A place to discuss the challenges and victories of living our best lives.

## Living with Bipolar Disorder and OCD support group Centennial C

**Nathan Siegel; Molly Schiffer, LCPC, Center for OCD and Anxiety at Sheppard Pratt**

Those of us who have both Bipolar Disorder and OCD know that experiencing both of them at once can present unique challenges. In this support group, participants will have a chance to share about their experiences navigating living with these two often misunderstood and stigmatized diagnoses. This might include sharing about how being in manic, hypomanic, mixed, or depressed states has impacted their experience of OCD, or how OCD has impacted their Bipolar Disorder. We will also share strategies to continue with OCD treatment while experiencing a Bipolar

# FRIDAY EVENING

## Hoarding Disorder Recovery Support Group *Centennial G-H*

**Stacey Murphy**, *Canadian Mental Health Association*; **Mark Snelgrove**, *Hoarding Response Coalition of SDG*; **Jesse Edsell-Vetter**, *Homeowner's Rehab Inc*

This group is for individuals with hoarding disorder, which is characterized by difficulties discarding, extreme clutter, and acquiring behaviors. Individuals will be able to share their experiences with others who have hoarding, and help one another with some of the challenges specific to it. This group supports the idea that CBT for hoarding is helpful and that treatment success is possible.

## What Comes Next? Managing OCD for the Long Run *Mineral D-G*

**Aaron Ingber**; **Mary Samson**

OCD is insidious. ERP gives us a roadmap for controlling our symptoms and bringing us out of crisis. But OCD is a chronic condition that affects our relationships and work life. What are the tools we can use when we are just feeling stuck? How can we offer ourselves compassion when we just can't summon the willpower to keep fighting? Mary and Aaron manage the longest running OCD support group in the country. We are also OCD sufferers, who know that experiencing OCD can be a lonely journey but having people around you who understand is very, very powerful. We are excited to bring the knowledge we've gained to lead an interactive discussion of these topics at this year's conference.

## Moral Scrupulosity Support Group *Centennial C*

**Cassie Marzke**, *A Penny for Your Intrusive Thought*; **Jon Hershfield**, *LCMFT, Sheppard Pratt*

Scrupulosity OCD conversations often focus on fears relating to religion, but scrupulosity can also attach to general morality without a religious component. People with moral scrupulosity have a variety of intrusive thoughts that stem from the fear of being a "bad" person. This group will serve as a space for people with moral scrupulosity (including those who do not experience religious scrupulosity) to connect and share personal stories as well as to discuss group leaders' experiences with moral scrupulosity. A therapist will provide insights about treatment for moral scrupulosity, and participants will have the option to take part in fun activities and brainstorm creative ways to challenge moral scrupulosity.

## Co-Morbid Eating Disorder and OCD Support Group *Centennial A*

**Beth Brawley**, *LPC, Life Without Anxiety LLC*; **Sarah Green**

When OCD and an eating disorder present hand in hand, the difficulty of treatment is compounded. In this group, individuals with comorbid OCD and eating disorders, as well as family members and loved ones of those suffering from these disorders, will come together in a safe and supportive environment. Common stuck points will be discussed and insight into addressing these roadblocks will be shared. Individuals will be able to ask questions of facilitators and each other as to how best to support themselves and their loved ones through this journey to recovery.

## ASD/ADHD and OCD - A Support Group *Centennial F*

**Karen Swanay** *LPC, LMHC, LPC-MHSP*

A support group for people who live with ASD and or ADHD and have a diagnosis of OCD. Talk with people who experience similar struggles, help others with ideas, and meet others at the conference that share some identity overlap with you.

## Finding YOU When You Love Someone With OCD *Centennial B*

**Josh Spitalnick**, *PhD, Anxiety Specialists of Atlanta*; **Michelle Witkin**, *PhD*

When you love someone with OCD, whatever the relationship, it can feel like the disorder comes crashing into your own life. You may experience exhaustion, frustration, fear, overwhelm, sadness - the list goes on. This interactive support group will focus on taking care of yourself when you care deeply about someone with OCD. Facilitated by two psychologists who are OCD specialists with lived experience of loving someone with OCD, this support group will engage attendees to look at the impact OCD has on their lives, explore ways to keep themselves physically and emotionally healthy, identify common needs, and brainstorm on ways to build and access resources all year round. Parents, siblings, significant others, friends, professionals - all are welcome!

## Sleeping with Jesus—Dating and Intimacy for Young Adults with Religiosity *Mineral B-C*

**Allyson Guilbert**, *LCSW, Mindset Family Therapy*; **Annabella Hagen**, *LCSW, Mindset Family Therapy*

Do you ever worry about your intrusive thoughts? You know, the ones you don't want anyone to know about. They're so embarrassing, you'd be petrified if your friends found out what you were thinking? The reality is, the OCD mind train is intrusive and discouraging and it leaves the sufferer feeling ashamed and alone... YOU ARE NOT ALONE in your struggle. There are other teenagers who feel exactly as you do. They know your thoughts because they experience them too. So when you walk into this group setting you will come to realize this is the place for you. You will be able to express yourself openly and honestly with your peers about your uncomfortable sexual thoughts caused by OCD.

## Friday Night Lights: Young Adult Game Night! *Agate A-C*

**Alexander Rosenberg**; **Kyle King**

Yes, this is an OCD conference...but not every session has to be about OCD. Come to this session to play games with other young adults: some digital, some old-fashioned board games! This event is intended to be a community building, evening mingle activity. Once the Conference begins to quiet down for the night, instead of going to your room alone, come hang out with fellow young adults with OCD! You will get to know and meet some of your future friends! Young adults that are "veterans" of the Conference will moderate and make sure everyone is having a good time! Join for lots of laughs!

8:00pm–9:30pm

## The Story of Unmasking Undiagnosed OCD (Told Through Film) *Capital 5-7*

**Lance Childers**; **Patricia Perrin Hull, PhD**, *OCD and Anxiety Treatment Center of Houston*

Films can elicit a range of emotions from audiences, causing them to empathize with the characters in the story. During this session, an award-winning short film, *Sky*, will be shown.

The film portrays the journey and inner struggle of a talented young pianist who becomes tormented by the one thing that once brought him relief — music. Afterwards, the film will be discussed by a panel of therapists alongside the filmmakers. The panel will explore how films may be used as a therapeutic and educational tool to help recognize OCD in kids and teens, and facilitate discussion between patients, therapists, family members, and friends through an engaging question and answer session with attendees.





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# SATURDAY SCHEDULE

## OVERVIEW

SATURDAY, JULY 9

<p><b>7:00am–8:00am</b></p>	<p><b>Light Breakfast</b>  <i>Buffet Breakfast throughout Exhibit Hall, Capital Ballroom 1-4 and Foyer, Fourth Floor</i></p>  <p><b>Breakfast</b></p> <p>The Conversation Cafe is back! High-top tables will be scattered throughout the rear of the Exhibit Hall. Tables will be assigned specific themes and topics to help attendees connect with similar experiences and meet new people.</p>
<p><b>7:00am–6:00pm</b></p>	<p><b>Check-in and Onsite Registration</b>  <i>Centennial Foyer, Third Floor</i></p>
<p><b>7:00am–6:00pm</b></p>	<p><b>Continuing Education Desk Open</b>  <i>Centennial Foyer, Third Floor</i></p> <p>All professional attendees registered at the Therapist/Clinician level seeking to earn continuing education (CE) credit must sign in and out at the start and end of each day, the exception being Psychologists who will need to check-in to each session attended. See page 6 for CE/CME information.</p>
<p><b>7:00am–7:00pm</b></p>	<p><b>Exhibit Hall Open</b>  <i>Exhibit Hall, Capital Ballroom 1-4 and Foyer, Fourth Floor</i></p> <p>OCD Conference Bookstore          Art Gallery          IOCDF Information &amp; Welcome Booth</p>  <p><b>Bookstore</b></p> <p>See page 14 for a list of Exhibitors.</p>
<p><b>8:00am–5:45pm</b></p>	<p><b>Conference Presentations</b>  <i>See pages 48-53 for a full schedule of presentations.</i></p>
<p><b>8:00am–5:45pm</b></p>	<p><b>Youth Programming</b>  <i>Elementary Schoolers: Quartz A-B, 3rd Floor</i>  <i>Middle Schoolers: Granite A-C, 3rd Floor</i>  <i>High Schoolers: Agate A-C, 3rd Floor</i>  <i>See page 27 for a full schedule of activities.</i></p> 

<p><b>11:15am–12:30pm</b></p>	<p><b>Book Signings at OCD Conference Bookstore</b>  <i>Exhibit Hall, Capital Ballroom 1-4 and Foyer, Fourth Floor</i></p>  <p><b>Bookstore</b></p> <p>See page 15 for a list of authors.</p>
<p><b>11:15am–12:30pm</b></p>	<p><b>Lunch on your Own</b>          Check the Program Guide Insert for local restaurant listings.</p>
<p><b>2:00pm–2:15pm</b></p>	<p><b>Afternoon Coffee Break</b>  <i>Exhibit Hall, Capital Ballroom 1-4 and Foyer, Fourth Floor</i></p> <p>Sponsored by Anxiety Institute</p>  <p><b>anxiety institute</b></p>
<p><b>4:15pm–5:45pm</b></p>	<p><b>Keynote Address and Awards Presentations</b>  <i>Centennial Ballroom D-G, Third Floor</i></p>
<p><b>5:45pm–7:00pm</b></p>	<p><b>Researcher and Exhibitor Meet &amp; Greet</b>  <i>Exhibit Hall, Capital Ballroom 1-4 and Foyer, Fourth Floor</i></p> <p>Cash bars throughout Exhibit Hall, light snacks provided.</p> <p>Sponsored by Pathlight Mood &amp; Anxiety Center</p>  <p><b>Pathlight Mood &amp; Anxiety Center</b></p>
<p><b>5:45pm–10:00pm</b></p>	<p><b>Saturday Evening Activities &amp; Support Groups</b>  <i>Turn to pages 47-49 for descriptions and a detailed schedule.</i></p>
<p><b>7:00pm–10:00pm</b></p>	<p><b>OCD Conference Party: Dare to Do Denver!</b>  <i>Centennial Ballroom D-H, Third Floor</i>          Cash bar and light dinner.</p>

8:00AM–9:30AM

9:45AM–11:15AM

12:30PM–2:00PM

EVERYONE

**NAVIGATING SEXUAL IDENTITY AND SEXUAL FUNCTIONING WITH OCD**  
April Kilduff, LCPC; Tracie Ibrahim, LMFT; Nicholas Farrell, PhD  
*Centennial D*

**#REALOCD: UNITING OUR VOICES TO CREATE CHANGE!**  
Chris Trondsen, AMFT, APCC; Elizabeth McIngvale, PhD, LCSW; Ethan Smith; Katie O'Dunne, MDiv; Thomas Smalley, CSCS; Valerie Andrews  
*Centennial D*

**THE COMPLEX LANDSCAPE OF OCD IN AUTISM SPECTRUM DISORDER**  
Craig Heacock, MD; Kendal Nolan; Megan Wolff, MOT, OTR/L  
*Centennial C*

EVERYONE

**PURE O: A DISCUSSION ON THE USE OF THE TERM**  
Chrissie Hodges, CPFS; Steven Phillipson, PhD; Chris Trondsen, AMFT, APCC; Jon Hershfield, LCMFT  
*Capital 5-7*

**CHICKEN OR THE EGG: WHEN OCD AND DEPRESSION TEAM UP**  
Beth Brawley, LPC; Michael Stier, LCPC  
*Centennial F*

**THE REASSURANCE TRAP**  
Amanda Petrik-Gardner, LCPC; Laura Smestad, LMHC; Nathan Peterson, LCSW  
*Capital 5-7*

EVERYONE

**TELEMEDICINE VS. IN-PERSON APPOINTMENTS: HOW TO CHOOSE AND WHAT TO EXPECT**  
Andrea Guastello, PhD; Joseph McNamara, PhD; Megan Barthle-Herrera, PhD; Melissa Munson, PhD; Robert Henderson, PhD  
*Centennial G-H*

**LIVING WITH IMPERFECTION: MANAGING PERVERSIVE PERFECTIONISM WITH OR WITHOUT OCD**  
April Kilduff, LCPC; Madina Alam, LMHC; Nicholas Farrell, PhD; Taylor Newendorp, LCPC  
*Mineral B-C*

**CHANGING OUR RELATIONSHIP WITH SHAME**  
Michael Heady, LCPC  
*Centennial G-H*

LIVING WITH OCD

**SUCCESSFUL RELATIONSHIPS AND BDD? YES, YOU CAN HAVE THEM!**  
Scott Granet, LCSW  
*Centennial C*

**MENTAL COMPULSIONS: THE INVISIBLE BEHAVIORS THAT COULD BE KEEPING YOU STUCK**  
Kelley Franke, LMFT; Kevin Foss, MFT; Lauren Rosen, LMFT  
*Mineral D-G*

**DATING AND DOUBTING: OCD AND RELATIONSHIPS WITH IOCDF ADVOCATES AND REAL LIFE COUPLE, KATIE AND ETHAN**  
Ethan Smith; Katie O'Dunne, MDiv  
*Centennial D*

PARENTS AND FAMILIES

**PARENTS OF CHILDREN WITH PANS/PANDAS: CONSIDERATION OF BURDEN AND APPROACHES TO COPING**  
Jason Tinero, PsyD; Margo Thienemann, MD; Sana Ahmed, LCSW; Stephanie Glover  
*Centennial A*

**WALKING THE TIGHTROPE: PARENTING THROUGH OCD**  
Ali Hodin-Baier; Chris Baier; Melissa Mose, LMFT; Michelle Witkin, PhD  
*Centennial B*

**GETTING SCHOOLED: OCD AND RELATED DISORDERS ACCOMMODATIONS AND SUPPORTS FOR THE CLASSROOM ENVIRONMENT**  
Katrina Scarimbolo; Denise Egan Stack, LMHC  
*Mineral D-G*

HOARDING DISORDER

**CASE MANAGEMENT AND HARM-REDUCTION INTERVENTIONS FOR HOARDING**  
Mark Snelgrove; Stacey Murphy; Jesse Edsell-Vetter  
*Mineral B-C*

**FLASH TALKS! RESEARCH UPDATE ON RISK AND VULNERABILITY FOR HOARDING DISORDER**  
Organizer: Kiara Timpano, PhD  
All presenters listed in description  
*Centennial C*

**USING PEER SUPPORT GROUP MODELS IN SUPPORTING INDIVIDUALS WITH HOARDING DISORDER**  
Lindsay Bacala, MSW, RSW; Spenser Martin  
*Centennial A*

THERAPISTS INTRO

**OCD AND PSYCHOSIS**  
James Claiborn, PhD; Robert Hudak, MD; Stephanie Eken, MD  
*Centennial B*

**CUTTING-EDGE INTERVENTIONS FOR BFRBS: EVIDENCE-BASED, PERSONALIZED TREATMENT**  
Suzanne Mouton-Odum, PhD  
*Centennial A*

**CONSIDERING SAFETY IN ERP FOR BLACK CLIENTS WITH OCD**  
Darlene Davis Goodwine, PhD; Michelle Cole  
*Centennial B*

THERAPISTS ADVANCED

**ACT FOR OCRDS IN YOUTH: TIPS AND TRICKS FOR OPTIMIZING TREATMENT DELIVERY**  
Jonathan Abramowitz, PhD; Julie Petersen, MS; Leila Capel; Lisa Coyne, PhD  
*Mineral D-G*

**PERINATAL OCD: WHAT TO EXPECT WHEN YOUR PATIENT IS EXPECTING INTRUSIVE THOUGHTS**  
Ashley Ordway, LMHC; Danielle Cooke, PhD; Megan Barthle-Herrera, PhD, PMH-C  
*Capital 5-7*

**HOW TO TREAT BODY DYSMORPHIC DISORDER (BDD) AND HOW IT DIFFERS FROM TREATING OCD**  
Chris Trondsen, AMFT, APCC; Scott Granet, LCSW  
*Mineral B-C*

RESEARCH TO CLINICAL PRACTICE

**IMMUNOLOGICAL INFLUENCE ON OCD: WHAT ROLE DOES AUTOIMMUNE OCD HAVE IN DIAGNOSIS AND TREATMENT?**  
Craig Shimasaki, PhD  
*Centennial F*

**SPECIAL AREAS OF CONSIDERATION FOR TREATING OCRDS AND COMORBID CONDITIONS**  
Eric Storch, PhD; Gina Belli; Jennifer Buchholz, MA; Julie Petersen, MS; Nathaniel Van Kirk, PhD  
*Centennial G-H*

**PREGNANCY, DELIVERY, AND BEYOND: INTEGRATION OF PERINATAL OCD IN INPATIENT AND OUTPATIENT CARE**  
Annelise Cunningham, PhD; Danielle Cooke, PhD; Lindsay Lebin, MD; Megan Barthle-Herrera, PhD  
*Centennial F*

2:15PM–3:45PM

4:15PM–5:45PM

**MORE THAN ANXIETY: NEW PARENTHOOD AND OCD**  
Annelise Cunningham, PhD; Danielle Cooke, PhD;  
Lindsay Lebin, MD; Ashley Ordway, LMHC;  
Megan Barthle-Herrera, PhD  
*Mineral D-G*

**MAKING MEANING FROM LOSS: MOVING BEYOND  
GRIEF IN OCD TREATMENT**  
John Hart, PhD, LPC-S; Katy Rothfelder, LPC-A;  
Rachel Saffer, LCSW-S  
*Centennial D*

**HEALTH ANXIETY TREATMENT: PUTTING A STOP TO  
THE URGENCY OF THE EMERGENCY**  
Alie Garza, MSW; Emily Weems, LCSW-S  
*Centennial F*

**YOU DO THE COMMUNICATING, NOT YOUR OCD**  
Emily Melrose; Molly Fishback; Nathaniel Van Kirk, PhD  
*Centennial G-H*

**MARRIED TO TWO PEOPLE: LIVING AS A COUPLE WITH  
OCD IN THE SHADOWS**  
David Culkin, PhD; Jacqueline Pfeifer, PhD;  
Jonathan Abramowitz, PhD; Michaela Culkin, PhD  
*Centennial A*

**NON-SHOPPING TRIP: EXPERIENTIAL SESSION TO  
PRACTICE RESISTING ACQUIRING**  
Randy Frost, PhD; Gail Steketee, PhD, LICSW  
*Centennial C*

**NEWS FLASH: ERP IS NOT THE FIRST-LINE TREATMENT  
FOR OCD; SO WHAT IS THE FIRST-LINE GOLD  
STANDARD?**  
Elizabeth McIngvale, PhD, LCSW; Jon Grayson, PhD  
*Capital 5-7*

**OCD TREATMENT FOR DIVERSE POPULATIONS FROM A  
DIVERSITY, EQUITY, AND INCLUSION LENS**  
Chris Trondsen, AMFT, APCC; Jelani Daniel, LPC;  
Jenny Yip, PsyD; Marcia Rabinowits, PsyD  
*Centennial B*

**WHERE NOW? CLINIC DIRECTORS DISCUSS NAVIGATING  
COMMON TREATMENT BARRIERS AND FUTURE  
RESEARCH NEEDS**  
Adam Reid, PhD; Lauren Wadsworth, PhD;  
Lisa Coyne, PhD; Marni Jacob, PhD  
*Mineral B-C*

**IOCDF AWARDS AND  
KEYNOTE ADDRESS**

**OCD:  
A FAMILY  
AFFAIR**

**The Kinberg Family**  
*Centennial D-H*



Toby



Oliver



Mali



Simon

We never truly experience anything in isolation. Family members and loved ones who surround us — though perhaps not the ones diagnosed with OCD — often have their own intimate journeys with the disorder.

We are excited to have the Kinberg family join us to talk about their family’s experience with OCD. Teen Toby, younger brother Oliver, and parents Mali and Simon Kinberg (*The Martian, X-Men: First Class, The 355, Invasion*) will take the #OCDCon stage to share what life is like living with OCD.

See pages 48-53 for detailed descriptions of each presentation.

- EVERYONE
- LIVING WITH OCD
- PARENTS & FAMILIES
- YOUNG ADULTS
- HOARDING DISORDER
- THERAPISTS
- RESEARCH TO CLINICAL PRACTICE
- BDD
- PANS/PANDAS
- WORKING WITH DIVERSITY
- PERINATAL OCD
- Workshops with black outline are eligible for CE/CME credits.

These tracks indicate who the intended audience is. However, all of our presentations are open to everyone.

**SESSION AVAILABILITY**

Seating at all workshops, seminars, and lectures is on a first-come, first-served basis.

## 8:00am–9:30am

### Navigating Sexual Identity & Sexual Functioning With OCD\*

Centennial D

**April Kilduff, LCPC, NOCD; Tracie Ibrahim, LMFT, NOCD; Nicholas Farrell, PhD, NOCD**

The fear and distress that come from questioning one's own sexuality and sexual intentions often resorts in confusion, isolation, and a creation of dysfunctional barriers with intimate relationships. Very frequently, there is a misunderstanding of groinal response that leads to even further distress, embarrassment, and shame. During this session, a brief overview of the OCD subtypes most often associated with sexual distress and dysfunction will be presented from the perspective of the person experiencing the difficulties. We will explore effective ERP strategies that utilize a sex-positive, behavioral approach to improving these important areas of functioning. There will be opportunities to share, get feedback, and participate in learning activities, including practice with making and documenting appropriate ERP hierarchy exposures.

### Pure O: A Discussion on the Use of the Term

Capital 5-7  
**Chrissie Hodges, CPFS, Treatment for OCD Consulting; Steven Phillipson, PhD, Center for Cognitive Behavioral Psychotherapy, New York; Chris Trondsen, AMFT, APCC, The Gateway Institute; Jon Hershfield, LCMFT, Sheppard Pratt**

To use or not to use the term 'Pure OCD' has been a long debate in the OCD therapeutic and advocacy community alike. Created as a way to allow individuals with intrusive thoughts and mental rituals feel connected to the community, Dr. Steven Phillipson coined the term 'Pure OCD' and many embrace the term as a life-saver, while others reject it as misleading. Panelists will offer a thoughtful discussion on the term from a clinical and lived experience perspective, bringing together the opposing and supportive opinions and bridging a gap between the divide on this controversial term.

### Telemedicine vs. In Person Appointments: How to Choose and What to Expect

Centennial G-H

**Andrea Guastello, PhD, University of Florida; Joseph McNamara, PhD, University of Florida; Megan Barthele-Herrera, PhD, University of Florida; Melissa Munson, PhD, University of Florida; Robert Henderson, PhD, Rogers Behavioral Health - Atlanta**

Exposure and response prevention provided through telemedicine appointments has been available for many years and research has documented its efficacy as an alternative to in-person appointments. Due to physical-distancing requirements of the COVID-19 pandemic, utilization of telemedicine appointments has increased dramatically in recent years. As such, patients and providers now have increased treatment options regarding how to access/provide care. This presentation will include a discussion of research on the efficacy of telemedicine for OCD, factors for consideration when deciding between telemedicine vs. in-person (e.g. location, type of obsessions/compulsions, availability of support), and ways to adapt exposures and increase engagement in telemedicine appointments. Issues related to insurance coverage of telemedicine services and advocacy for coverage will also be discussed.

### ACT for OCRDs in Youth: Tips and Tricks for Optimizing Treatment Delivery\*

Mineral D-G

**Jonathan Abramowitz, PhD, University of North Carolina; Julie Petersen, MS, Utah State University; Leila Capel, Utah State University; Lisa Coyne, PhD, New England Center for OCD and Anxiety**

Acceptance and Commitment Therapy (ACT) as an emergent treatment approach for obsessive compulsive and related disorders (OCRDs). While the majority of the current evidence focuses on adults, there is nascent research on implementing ACT and ACT-enhanced treatments for OCRDs in children and adolescents. In this panel, leading experts in ACT and OCRDs will share professional perspectives on the current state of the research on ACT for OCRDs in youth. The panel will also discuss tips and strategies for optimizing delivery of ACT with youth, including developmental, familial, and cultural considerations. Suggestions for treatment engagement and motivation will also be reviewed. The panel will end with future research and clinical directions.

### Successful Relationships and BDD? Yes, You Can Have Them!

Centennial C

**Scott Granet, LCSW, The OCD-BDD Clinic of Northern California**

In BDD, the preoccupation with body parts often leaves little time and energy to focus on the truly important aspects of life, such as romantic relationships. Hours spent mirror checking, camouflaging body parts, and searching for cosmetic remedies and plastic surgery options are just some of the many compulsive behaviors that can take up hours each day as can the constant obsessive thinking. As a result, relationships often become strained and fail to thrive. The primary focus of this workshop is to identify the many pitfalls associated with beginning and sustaining relationships while living with BDD and to help those with the disorder — and their partners — learn effective coping strategies.

### Parents of Children with PANS/PANDAS: Consideration of Burden and Approaches to Coping

Centennial A

**Jason Tinero, PsyD, PGSP-Stanford PsyD Consortium; Margo Thienemann, MD, Stanford University; Sana Ahmed, LCSW, Stanford Children's Hospital; Stephanie Glover, PGSP-Stanford PsyD Consortium**

Parenting, in the best of situations, is filled with emotions and responsibilities. When a child is ill, especially with a relatively uncommon disorder that affects children's emotions, behaviors, and physical health, about which too few people know, without an established road map for treatment, parents' coping capacities face an enormous challenge. We work in an Immune Behavioral Health program, treating children with Pediatric Acute-onset Neuropsychiatric Disorder (PANS) and Pediatric Autoimmune Neuropsychiatric Disorder Associated with Streptococcal infection (PANDAS). In this session, we address ways having a child with PANS impacts parents, describe a group intervention aimed at helping "PANS parents", and share some clinical pearls we have gleaned from our experience.

### Immunological Influence on OCD: What Role Does Autoimmune OCD Have in Diagnosis and Treatment?\*

Centennial F

**Craig Shimasaki, PhD, Moleculera Labs**

Complex disorders are multifaceted, and typically involve more than just one organ system of the body before resulting in a chronic syndrome. Clinical research and evidence support involvement of certain portions of the brain in OCD, but is that the only organ system that leads to the resulting syndrome? Growing evidence is supporting at least a subset of OCD results from neuroimmune dysfunction, brain inflammation, and autoimmune encephalopathy secondary to infectious disease. This session will cover clinical models and the growing connection between the brain, the immune system, and molecular mimicry of infectious agents leading to neuropsychiatric syndromes. We will also cover SARS-CoV-2, the infectious agent of COVID-19 and its long-COVID sequelae which have revealed additional insights into these connections.

### OCD and Psychosis\*

Centennial B

**James Claiborn, PhD; Robert Hudak, MD, Western Psychiatric Institute and Clinic; Stephanie Eken, MD, Rogers Behavioral Health**

This presentation will explore the overlap between OCD and psychosis with a focus on assessment and treatment recommendations. Presenters will review assessment considerations, including describing the spectrum of OCD and psychosis symptoms, identifying ways to distinguish OCD from psychosis symptoms, and considering how symptoms may overlap. Presenters will then highlight treatment options including medication, psychotherapy, and neuromodulation, and how to adapt treatments for co-occurring psychosis and OCD. Specifically, presenters will discuss how to effectively incorporate exposure and response prevention for these clients. Presenters will also speak to considerations for youth experiencing early risk for psychosis and co-occurring OCD symptoms. Presenters will incorporate research, de-identified cases, and lived experience of a person with co-occurring OCD-psychosis sharing his experiences navigating treatment.

### Case Management and Harm Reduction Interventions for Hoarding\*

Mineral B-C

**Mark Snelgrove, Hoarding Response Coalition of SDG; Stacey Murphy, Canadian Mental Health Association; Jesse Edsell-Vetter, Homeowner's Rehab Inc**

Current hoarding disorder strategies for assessment and intervention in the community commonly use two sets of related strategies: harm reduction and case management. Participants will learn how to make use of an interdisciplinary team approach with a focus on harm reduction and case management as a mechanisms of intervention. Expert practitioners will share their promising practice models and strategies for implementation.

## Weaving Art Throughout the Therapy Journey *Agate A-C*

Joan Zeller, LMSW, ATR, Zeller & Associates EAP, LLC

Being a teen with OCD can stir up a lot of feelings, many of which fuel OCD behavior creating a challenging cycle. Join other conference teens in using creativity to manage challenging feelings like shame, loneliness, fear, envy, anger and rigidity. Experience the connection of a collective art process. No need to worry about supplies or mess. Come prepared to have fun and connect. Leave with new ideas and creative tools.

## Let's Improvise! Helping Kids Manage OCD with Humor, Play and Improv Games *Granite A-C*

Kelley Franke, LMFT, *The Center for OCD*; Kevin Foss, MFT, *The California OCD and Anxiety Treatment Center*

While there's nothing funny about an OCD diagnosis, finding humor in your journey with OCD can be invaluable in recovery. This workshop will focus on helping young adolescents to use improvisation instruction and games to:

- cultivate flexibility through understanding dialectics
- normalize the various content areas of OCD
- externalize their OCD
- create coping statements that support disengaging from compulsions
- defuse from obsessions — reorient toward their values in the face of obsessions
- use humor to support coping with OCD

The workshop will focus on creating a sense of community through improvisation games and will also highlight the CBT skills that are implemented throughout each improv activity.

## The OCD Olympics *Quartz A-B*

Hannah Breckenridge, MSW, *OCD DC*

Come have some fun at the 2022 OCD games!! This year's events include: Swimming through Uncertainty; Mental Gymnastics; and Track and Feels. Be ready to move around and show off your brain power! Who knows? You may even take home a medal!

## 9:45am–11:15am

### #RealOCD: Uniting Our Voices To Create Change! *Centennial D*

Chris Trondsen, AMFT, APCC, *The Gateway Institute*; Elizabeth McIngvale, PhD, LCSW, *McLean OCD Institute / Houston*; Ethan Smith, IOCDF National Advocate; Katie O'Dunne, MDiv, *Faith & Mental Health Integrative Services*; Thomas Smalley, CSCS; Valerie Andrews, *Ms Mable Sparrows, Inc.*

As someone with OCD, are you tired of hearing others say they're "so OCD" because they enjoy organizing their closet or infuriated when someone considers OCD a personality quirk? How many of you were misdiagnosed or received treatment from someone using talk therapy and spent the session providing reassurance? We've also had these frustrating experiences, and as national and lead advocates for the IOCDF, we need YOUR help to create change. Although information on OCD has improved over the years, there are still many misconceptions. It's up to us, the OCD community, to educate the public on what OCD really is and make sure the correct information is getting out there! Join the conversation; we want to hear from you!

## Perinatal OCD: What to Expect When Your Patient is Experiencing Intrusive Thoughts\* *Capital 5-7*

Ashley Ordway, LMHC, *University of Florida*; Danielle Cooke, PhD, *University of Colorado*; Megan Barthle-Herrera, PhD, *University of Florida*

The perinatal period is a critical time for the onset or increase in severity of OCD symptoms, which have the potential to impact parents, infants, and families. This presentation will review etiology, differential diagnoses, assessment, related concerns, and future directions. Limitations and challenges in current screening materials will be discussed and recommendations for current practice will be made considering these barriers. The focus of this presentation will be interventions for individuals with perinatal OCD and their families, focusing on specific exposure ideas and how to implement them successfully to optimize treatment outcomes and daily functioning. Participants will be given the opportunity to work with their peers in breakout groups to design potential interventions and exposures, faced with increasingly challenging "roadblocks."

## Special Areas of Consideration for Treating OCRDs and Comorbid Conditions\* *Centennial G-H*

Eric Storch, PhD, *Baylor College of Medicine*; Gina Belli, *Northwestern University*; Jennifer Buchholz, MA, *University of North Carolina at Chapel Hill*; Julie Petersen, MS, *Utah State University*; Nathaniel Van Kirk, PhD, *McLean Hospital*

This presentation will highlight outcomes, comorbidities, and other important considerations in the treatment of obsessive-compulsive and related disorders (OCRDs). The first presentation will discuss longitudinal outcomes and directionality between OCD and depressive symptoms. Second, longitudinal outcomes and the effect of comorbid conditions on acceptance-enhanced behavior therapy for adolescent trichotillomania will be presented. Third, outcomes from CBT for children with OCD and Autism Spectrum Disorder will be shared. Lastly, a systematic review of the treatment of co-occurring obsessive compulsive and psychotic symptoms will be presented, focusing on gaps in the literature and areas for future research. In sum, this talk hopes to highlight recent research developments in the treatment and understanding of OCRDs, with a special focus on comorbidity.

## Mental Compulsions: The Invisible Behaviors that Could be Keeping You Stuck *Mineral D-G*

Kelley Franke, LMFT, *The Center for OCD*; Kevin Foss, MFT, *The California OCD and Anxiety Treatment Center*; Lauren Rosen, LMFT, *Center for the Obsessive Mind*

The most common portrayal of OCD involves an individual avoiding sidewalk cracks, scrubbing their hands or getting stuck at the door, locking and re-locking. It's little wonder, then, that most people remain unaware of an invisible behavior that is just as common to OCD: mental compulsions. These covert actions are every bit as problematic as their overt counterparts, and if you don't know what you're looking for, they're impossible to spot and drop. This talk will provide education about mental compulsions: what they are, how they differ from obsessions, how you can identify them and ways to support yourself in disengaging from them. It will also cover non-engagement responses, and the difference between dropping mental compulsions and thought stopping.

## FLASH Talks! Research Update on Risk and Vulnerability for Hoarding Disorder\* *Centennial C*

Kiara Timpano, PhD, *University of Miami*

Welcome to the inaugural Hoarding FLASH Talks Series! This session will feature a series of talks no longer than 5 minutes and with only three slides per presenter. Come learn more about the state of research on Hoarding Disorder in this fun and fast session.

SET 1: Kiara Timpano, PhD; Hannah Raila, PhD; Mike Wheaton, PhD; Christiana Bratiotis, PhD, MSW

SET 2: Wendy Chen; Maddie Kushner; Sara Nutley

SET 3: Greg Chasson, PhD; Jessica Grisham, PhD; Jordana Muroff, PhD, LICSW.

## Cutting Edge Interventions for BFRBs: Evidence-Based, Personalized Treatment\* *Centennial A*

Suzanne Mouton-Odum, PhD, *Psychology Houston PC*

Body Focused Repetitive Behaviors (BFRBs) affect millions of people worldwide. As many as 2 in 50 people engage in body focused behaviors such hair pulling, skin picking, and nail biting resulting in alopecia, scarring, infections, and sometimes abdominal or plastic surgery. Most often these behaviors begin in childhood or adolescence, but can affect people of all ages. This workshop will provide a brief overview of BFRBs including research that has recently been concluded and how it will inform treatment. Current state-of-the-art treatment interventions for these disorders will be provided, including assessing and improving motivation, and using advanced techniques.

## Chicken or the Egg: When OCD and Depression Team Up\* *Centennial F*

Beth Brawley, LPC, *Life Without Anxiety LLC*; Michael Stier, LCPC, *Michael Stier Therapy LLC*

It is not uncommon for individuals to suffer from both major depressive disorder and obsessive compulsive disorder. Research indicates that one quarter to one half of people with OCD will also meet the criteria for a major depressive episode. When both conditions are present, an individual may struggle with consistent treatment follow through. However, with behavioral strategies, it is possible to engage in effective treatment for both conditions that allows individuals to continue to move towards recovery. This presentation will begin by identifying common stumbling blocks faced that impede effective treatment. Next, practical strategies will be shared to help individuals accurately differentiate between depression and OCD symptoms. Lastly, the impact and role of support people will be addressed.

## Walking the Tightrope: Parenting Through OCD *Centennial B*

Ali Hodin-Baier; Chris Baier, *UNSTUCK: an OCD kids movie*; Melissa Mose, LMFT; Michelle Witkin, PhD

Parenting a child with OCD can be tough. You want to help your child, yet you may feel you need help yourself. In this presentation by two OCD specialists (who are both parents of children with OCD) and parents of a child with OCD, we will discuss real examples of the many ways OCD complicates parenting. Using these real-life experiences, we will tease apart issues such as behavior versus anxiety, love and support, limits versus punishment, and many more. From our own experiences and feedback from other parents, we will bring you the best of the tools and resources we have found. Let's uncover skills to "walk the tightrope" of parenting your child while helping them to beat OCD.

## Living with Imperfection: Managing Pervasive Perfectionism With or Without OCD *Mineral B-C*

April Kilduff, LCPC, *NOCD*; Madina Alam, LMHC, *NOCD*; Nicholas Farrell, PhD, *NOCD*; Taylor Newendorp, LCPC, *NOCD*

Perfectionism can be a disruptive personality trait and set of beliefs for individuals with and without OCD. People's efforts to attain a sense of perfection can exacerbate the very anxiety and self-doubt they are hoping to escape. This presentation will review common problematic perfectionistic tendencies people struggle with, from people-pleasing to procrastination to self-criticism. We will examine how cognitive and behavioral efforts to achieve emotional, physical, romantic, and moral perfection can mirror compulsions in such subtypes as "Just Right" OCD, Relationship OCD, Scrupulosity, and Responsibility OCD—and how those attempts interfere with therapy itself. We will use clinical cases to teach attendees methods from CBT, ERP, and ACT to increase their tolerance of the discomfort associated with living an imperfect life.

## How to Raise Your Parents When You Have OCD (To Help or Get Out of the Way) *Agate A-C*

Allen Weg, EdD, *Stress and Anxiety Services of NJ*; Megan Cox, PsyD, *Stress and Anxiety Services of NJ*

Teens (ages 13-19) are invited to this supportive group setting where they will explore the ways they have found their parents to be helpful, or unhelpful, when it comes to responding to OCD. Teens will be invited to identify their goals regarding changes that they want, and learn communication skills geared towards making those changes happen.

## The Time to Practice is Now: How to Talk About OCD, Anxiety, and BIG Emotions with Your Parents *Granite A-C*

Allison Bonifay, LPC, *NW Anxiety Institute*; Kevin Ashworth, LPC, *NW Anxiety Institute*

Talking about BIG emotions is easier said than done! This summit helps teens identify the barriers to expressing themselves while providing common language to describe symptoms of OCD. The summit serves as an inclusive and safe place for middle-school aged attendees struggling with OCD to practice talking about the hard stuff.

## Letting Your Parents Off the Hook *Quartz A-B*

Marni Jacob, PhD, *Jacob Center for Evidence-Based Treatment*; Molly Martinez, PhD, *Specialists in OCD & Anxiety Recovery (SOAR)*; Katy Rothfelder, LPC-A, *Austin Anxiety and OCD Specialists*

You likely know by now that when you do what OCD wants, it just gets stronger... but did you know that your parent(s) might accidentally be feeding OCD, too? In this session, we will teach you how tricky OCD can be at getting your parents to do what OCD wants, and how to stop it. The technical term is "parental accommodation": we'll have fun teaching you what it is, why it happens, and how you—the kid!—can take back power, take control of your life, and let your parents off the hook! Through fun activities and real-life examples, you will learn how you can team up with the people who love you the most to overcome OCD!

## 12:30pm–2:00pm

### Dating and Doubting: OCD & Relationships with IOCDF Advocates, and Real Life Couple, Katie and Ethan *Centennial D*

Ethan Smith, *IOCDF National Advocate*; Katie O'Dunne, MDiv, *Faith & Mental Health Integrative Services*

Dating and relationships, especially with OCD tagging along, can feel so overwhelming and frustrating to approach, to explain, to understand! Katie and Ethan are both individuals navigating OCD, and each other. It may sound like a match made in reassurance. Turns out, thanks to treatment, a strong support system, willingness to communicate, and tough love...it's not. It's two individuals using the skills and tools of treatment together, to foster a healthy value-driven environment virtually free of reassurance and enabling. It's by no means perfect, always a work in progress, but possible. And totally worth it! Join Katie and Ethan as they discuss what works, what doesn't, and takes your questions to help your relationship with your partner, NOT OCD, level-up.

### The Reassurance Trap *Capital 5-7*

Amanda Petrik-Gardner, LCPC; Laura Smestad, LMHC, *Polaris Family Behavioral Health*; Nathan Peterson, LCSW, *OCD and Anxiety Counseling*

Doesn't it feel good to receive reassurance? Short term — maybe. Long term — no. We will explore this reassurance trap and how it actually prolongs our suffering. The different types of reassurance will be discussed, as they can be sneaky and come in many forms like Googling online, checking physical symptoms, self-reassurance, staring, and how even sharing your own OCD story can be problematic. Learn more helpful ways to catch these sneaky compulsions and how to respond differently to them. Also learn how to teach a loved one how to help.

### Changing Our Relationship with Shame *Centennial G-H*

Michael Heady, LCPC, *Anxiety and Stress Disorders Institute of Maryland, LLP*

Anxiety does not capture the entire experience of those struggling with OCD. In fact, anxiety has become an unhelpful shorthand to reference a wide range of emotions that are common in OCD. It can leave one to feel that their full experience is not being understood or addressed in treatment. The role of shame is a vital experience to understand and address for OCD recovery. This presentation will explore how shame is a universal emotion that is often confused with the more dysfunctional process, toxic shame. We'll discuss how shame is different than anxiety and requires different approaches. Learning how to identify and stop the toxic shame process will change our relationship with the core emotion shame.

### Getting Schooled: OCD & Related Disorders Accommodations and Supports for the Classroom Environment *Mineral D-G*

Katrina Scarimbolo, *University of South Florida*; Denise Egan Stack, LMHC

Attendees will be able to learn about OCD and related disorders can impact youth in schools. The discussion will center around how to navigate academic-related concerns and accommodations/supports (IEPs and 504). Examples of supports to maximize youth's educational and social success will be explored. Considerations according to developmental level will be discussed throughout the presentation. Thoughtful discussion around the difference between accommodations and "accommodating OCD behaviors" will be distinguished. Attendees can take away ideas for discussion with teachers, school administration, school mental health services and other parents. Other topics related to bullying and stigma will be explored. Attendees will be able to participate in a discussion and Q & A.

### The Complex Landscape of OCD in Autistim Spectrum Disorder\* *Centennial C*

Craig Heacock, MD; Kendal Nolan; Megan Wolff, MOT, OTR/L

A significant percentage of people on the autistim spectrum have OCD and this can make life and work and relationships much more challenging. In this session we will explore the interplay of OCD and ASD from a first person perspective, joined by the presenter's sister and her psychiatrist.

## Using Peer Support Group Models in Supporting Individuals with Hoarding Disorder\* Centennial A

**Lindsay Bacala, MSW, RSW, OCD Centre of Manitoba; Spenser Martin, OCD Centre Manitoba, Inc.**

Hoarding disorder carries stigma that leads to barriers in accessing treatment. Peer support options allow individuals to connect with one another in a safe, non-judgmental space. Peer support models are beneficial for engaging individuals in accessing support as well as an addition to other therapeutic services. Peer support models allow for agencies with financial constraints to provide supports to their communities. Session attendees will also learn how to adapt peer support groups to be accessible online. Online groups offer a unique experience providing participants with easy access, shared experiences, socialization and ability to connect with supports in their own homes. Using case examples and simple, innovative skill-building techniques, attendees will learn about best practices using peer support models.

## Pregnancy, Delivery, and Beyond: Integration of Perinatal OCD in Inpatient and Outpatient Care\* Centennial F

**Annelise Cunningham, PhD, University of Colorado, Anschutz Medical Campus; Danielle Cooke, PhD, University of Colorado; Lindsay Lebin, MD, University of Colorado, Anschutz Medical Campus; Megan Barthle-Herrera, PhD, University of Florida**

Intrusive thoughts and compulsive behaviors, particularly surrounding fetal/infant health and wellbeing, are incredibly common in the prenatal and postpartum periods. Further, women who are pregnant or in their postpartum period are at higher risk for development of new onset of OCD or exacerbation of preexisting OCD. Despite this, obstetric, neonatal, pediatric, and primary care have neglected opportunities for recognition, education, and intervention surrounding perinatal OCD and subsyndromal perinatal symptoms. This translational talk integrates published and ongoing research in perinatal OCD with practical recommendations for providers with the intent to enhance screening, education, and intervention efforts across a variety of inpatient and outpatient settings. It will also highlight recommendations for building a collaborative, multidisciplinary team and education of fellow healthcare providers.

## Considering Safety in ExRP for Black Clients with OCD\* Centennial B

**Darlene Davis Goodwine, PhD, Aidan Behavioral Health and Consulting; Mindful Counseling; Michelle Cole**

While OCD affects persons regardless of race and ethnicity, we are still developing clinical practices that benefit all races equitably. The pandemic challenged individuals with OCD because of the "real danger" of contamination. A parallel for Black individuals with OCD was the "real danger" of racial stress/trauma. Black individuals with OCD continue to navigate pandemic fears with racial fears. As clinicians seek to adjust to real contamination concerns, those treating Black individuals are met with the challenge of addressing racial fears and concerns in addition to OCD symptoms. Clinicians are often interested and seek opportunities to learn effective strategies useful in adapting EBPs, this session will speak to strategies useful in adapting ExRP for Black individuals with OCD.

## How to Treat Body Dysmorphic Disorder (BDD) and How it Differs From Treating OCD\* Mineral B-C

**Chris Tronsen, AMFT, APCC, The Gateway Institute; Scott Granet, LCSW, The OCD-BDD Clinic of Northern California**

Although BDD is an OCD related disorder, its treatment has stark differences and additional components when compared to the treatment of OCD. This presentation has two parts. The first focuses on specific treatment strategies and exposures for common BDD obsessions (nose, acne, skin discoloration, hair thinning) and compulsions (mirror checking, picture avoidance, camouflaging, reassurance seeking). The second half will focus on how BDD treatment differs from the treatment of OCD. BDD treatment includes addressing negative core beliefs, identifying contributing factors such as bullying and teasing, processing emotions during ERP for BDD, understanding the influence of cultural factors in appearance obsessions, and aiding the client in finding self-worth outside of their appearance. The presentation will conclude with a Q&A segment.

## The People Pleaser's Guide to Being Assertive Agate A-C

**Anna Korbel, LSW, University of Colorado Anschutz Medical Campus; Emily Hemendinger, LCSW, MPH, CU Anschutz; Stephanie Lehto, PsyD, University of Colorado**

Do you struggle with saying "no" to people? Worried about hurting someone's feelings or offending someone? Does the idea of telling someone what you need make you cringe? Join us for a presentation and activities about navigating getting your needs met (what we therapists like to call advocating), standing up for yourself, saying "no," and embracing awkwardness.

## It's All Fun and Games: Challenging Perfectionism, Symmetry, and "Just Right" OCD Granite A-C

**Jennifer Wilcox, PsyD, Lindner Center of HOPE; Kellie Korte, Lindner Center of Hope; Lindsey Conover, PhD, Lindner Center of Hope; Nicole Bosse, PsyD, Lindner Center of Hope**

This interactive workshop will allow participants to practice tolerating their discomfort while having fun! Participants will engage in family-favorite games and activities (with a twist) that encourage them to lean into their anxiety rather than avoiding it. Each of the activities will include elements of exposure that require the participants to complete the activity in an imperfect or incomplete manner. With encouragement and support from their peers, this activity will help participants to build confidence in facing their fears.

## Facing Fears with Friends: We're All in This Together Quartz A-B

**Miranda Higham MS, University of Florida; Robert Henderson, PhD, Rogers Behavioral Health - Atlanta; Seth Downing, MS, University of Florida; Tannaz Mirhosseini, University of Florida; Megan Barthle-Herrera, PhD, University of Florida**

This workshop recognizes that courage is more than just facing things that we may find frightening or difficult as it also refers to our ability to actively challenge ourselves. However, being brave is not always something we have to do alone. During this workshop, participants will learn about OCD and social anxiety and engage in team-building activities to gain confidence and build interpersonal skills. Activities are designed to be interactive so that kids can learn from one another as well as the presenters. This session will teach kids how to face fears through fun activities with others to increase self-confidence.

## 2:15pm–3:45pm

## Making Meaning from Loss: Moving Beyond Grief in OCD\* Treatment\* Centennial D

**John Hart, PhD, LPC-S, Menninger Clinic; Katy Rothfelder, LPC-A, Austin Anxiety and OCD Specialists; Rachel Saffer, LCSW-S, Spry Little Birds Counseling**

Grief and loss are profoundly human experiences, as is the tendency to turn from painful emotions, feelings, and realities. Yet, it is in the process of allowing and accepting the experience of loss fully, and without defense, combined with compassion and a resolve to move towards valued actions, that we can move beyond the experiences of grief. Individuals suffering with obsessive compulsive disorder, or other mental health challenges may, at any point in time, come in contact with the experience of loss. Using processes within Acceptance and Commitment Therapy, and the latest research on grief, clinicians can support clients in noticing and allowing their experiences of loss of life expectations and hopes as a continuously unfolding process throughout treatment.

## NEWS FLASH: ERP is Not the First Line Treatment for OCD; So What is the First-line Gold Standard?\* Capital 5-7

**Jon Grayson, PhD, The Grayson LA Treatment Center for Anxiety and OCD; Elizabeth McIngvale, PhD, LCSW, McLean OCD Institute / Houston**

Why isn't ERP the true gold standard of OCD treatment? Has coping with OCD meant accepting suffering as a fact of recovery? Are you constantly playing "whack-a-mole" with your OCD vs. insight and freedom? An introduction to the pitfalls of starting ERP before one is ready and how readiness comes BEFORE ERP will take place. UP next: are you ready for the gold?! The chemical symbol for gold is AU; that's right, Accepting Uncertainty(AU) is the missing gold from ERP. ERP alone allows for functioning, but ERP + AU allows for freedom. Join us as we share personal/professional insights into the treatment process of ERP+AU as the true gold standard intervention which allows for full freedom from OCD.

## YOU Do the Communicating, NOT Your OCD Centennial G-H

**Emily Melrose; Molly Fishback, Not Alone Notes; Nathaniel Van Kirk, PhD, McLean Hospital**

Communicating effectively is a hard skill for anyone to master, but communication can be especially difficult for those with OCD. When people with OCD communicate, they often doubt if they are offending other people, lying, or have "weird" body language. In this panel, we will discuss ERP skills audience members can utilize when with their treatment providers, family, and friends. We will talk about situations where they can practice being assertive, not giving into intrusive thoughts, and not asking for reassurance for others. By sharing our personal experiences and professional tips and tricks, we will incorporate both examples of communication mishaps and strategies to better one's communication skills. There will be time for questions at the end of our presentation.

## More Than Anxiety: New Parenthood and OCD\* *Mineral D-G*

**Annelise Cunningham, PhD**, *University of Colorado, Anschutz Medical Campus*; **Danielle Cooke, PhD**, *University of Colorado*; **Lindsay Lebin, MD**, *University of Colorado, Anschutz Medical Campus*; **Ashley Ordway, LMHC**, *University of Florida*; **Megan Barthe-Herrera, PhD**, *University of Florida*

Pregnancy and new parenthood are often portrayed as a magical time, yet it can be fraught with anxiety, uncertainty, and loss of control. This panel of experts is targeted to individuals with OCD and their partners who are considering becoming parents or pregnant, who are pregnant or preparing for a child, and those who recently have welcomed a child into their home. This panel of experts will be guided by the needs of the attendees but may cover topics such as the physiological/biological challenges of pregnancy, reproductive psychiatry, emetophobia, delivery fears, partner communication, self-care, sleep challenges, and preparing for parenthood with OCD.

## Non-Shopping Trip — Experiential Session to Practice Resisting Acquiring *Centennial C*

**Randy Frost, PhD**, *Smith College*; **Gail Steketee, PhD, LICSW**, *Boston University*

Being able to resist the temptation to walk past things that catch your eye is a lot easier said than done. Garage/yard sales, clearance centers, specialty stores, and the internet pull people toward that great deal, handy device, or unique item, presenting a special challenge for those struggling with hoarding behaviors. Drs. Randy Frost and Gail Steketee will guide participants through an experiential exercise of non-acquiring. After a brief introduction, participants will split into small groups led by a clinician to help participants talk aloud about what contributes to their desire to acquire and practice strategies for resisting urges to acquire so they can walk away.

## Married to Two People: Living as a Couple with OCD in the Shadows *Centennial A*

**David Culklin, PhD**; **Jacqueline Pfeifer, PhD**; **Jonathan Abramowitz, PhD**, *University of North Carolina*; **Michaela Culklin, PhD**

The purpose of this presentation panel is to tell our story of living with obsessive compulsive disorder (OCD) in the hope that it will resonate with other families coping with the disorder—that they are not alone. While there is a good amount of information available regarding specific clinical aspects of OCD and related disorders, fewer sources address the personal challenges we have faced as a couple for more than 25 years. This presentation will address challenges facing family members who live with OCD. As a result, it will foster further conversations regarding the support available for couples living with OCD. Drs. Pfeifer and Abramowitz, both experienced clinicians, will provide updates to current treatment options and research in the field.

## Health Anxiety Treatment: Putting a Stop to the Urgency of the Emergency\* *Centennial F*

**Alie Garza, MSW**; **Emily Weems, LCSW-S**, *McLean OCD Institute at Houston*

Health anxiety is a debilitating mental health condition that is oftentimes misunderstood by lay people and inadvertently reinforced by medical professionals/health care systems. Similar to OCD, individuals with health anxiety can feel incredibly stigmatized by the disorder and their quality of life is significantly affected. Health anxiety is highly treatable with Cognitive Behavior Therapy with Exposure and Response Prevention. This talk will focus on a patient/therapist sharing an individualized course of residential treatment. This talk will demonstrate how a collaborative therapeutic treatment plan promotes hope for recovery and successful, long term outcomes. The speakers will highlight key treatment components and considerations and discuss the important role of relapse prevention. This multimedia presentation will include storytelling involving video clips and Q&A.

## OCD Treatment For Diverse Populations From a Diversity, Equity, and Inclusion Lens\* *Centennial B*

**Chris Trondsen, AMFT, APCC**, *The Gateway Institute*; **Jelani Daniel, LPC**, *University of Houston-Clear Lake*; **Jenny Yip, PsyD**, *Renewed Freedom Center for Rapid Anxiety Relief*; **Marcia Rabinowits, PsyD**, *CBT Clinic for OCD and Anxiety*

Although OCD is found proportionally in individuals across different multicultural groups, disparities exist in accessing mental health care for diverse populations. This is partly due to mental health professionals not addressing these diverse populations' specific needs, including increased stigma, lack of outreach to these communities, the need for diversity in the OCD community, difficulties in accessing care, and a lack of representation in mental health treatment providers. These mentioned issues uniquely impact minority communities. Therefore, this panel provides clinicians with education and tangible and practical strategies to interact with diverse populations through a lens of diversity, equity, and inclusion. Furthermore, this panel focuses on educating clinicians on steps they can take to become a more inclusive treatment provider.

## Where Now? Clinic Directors Discuss Navigating Common Treatment Barriers and Future Research Needs\* *Mineral B-C*

**Adam Reid, PhD**, *CBTeam*; **Lauren Wadsworth, PhD**, *Genesee Valley Psychology*; **Lisa Coyne, PhD**, *New England Center for OCD and Anxiety*; **Marni Jacob, PhD**, *Center for Evidence-Based Treatment*

This panel brings together expert clinicians who are clinic directors from around the United States in order to voice clinical observations, troubleshooting techniques, and avenues for future research. Each presenter will discuss a topic that they believe is under-addressed in the literature and a common barrier for optimal exposure therapy. These topics will include the integration of dialectical behavior therapy and ERP, addressing low motivation for ERP, identifying and targeting lesser known OCD dimensions, and effectively navigating trauma symptoms during the treatment of OCD. Each presenter will provide a brief summary of background literature, use a case study to illustrate how to navigate this treatment barrier, and then open the floor to questions and discussion.

## Behind the Curtain: What Teens and Parents Wish the Other Knew *Agate A-C*

**Allen Weg, EdD**, *Stress and Anxiety Services of NJ*; **Megan Cox, PsyD**, *Stress and Anxiety Services of NJ*

*Combined session for Parents/Guardians and High Schoolers*

**Teens:** Put your learning into practice! Earlier this morning, teens (ages 13-19) identified things they want parents to know about what is helpful when responding to OCD. (You do not need to have attended the morning session to attend this session). **Parents:** Join this supportive and encouraging session where you can share your perspective and gain insight into how you can be most helpful for your teen with OCD. Together as a group, there will be the opportunity to exchange insights, review communication skills, and learn tips from the combined experience of two OCD specialists. Teens without parents and parents without teens are welcome!

## The Time to Practice is Now: Coming Together to Improve Communication and Understanding of Living with OCD *Granite A-C*

**Allison Bonifay, LPC**, *NW Anxiety Institute*; **Kevin Ashworth, LPC**, *NW Anxiety Institute*

*Combined session for Parents/Guardians and Middle-Schoolers*

Both middle-schoolers and parents unite to practice effective communication skills! Parents will be given tools and opportunities to practice supportive listening and communication about OCD symptoms and experiences. Middle schoolers will observe their parents trying out new skills and have an opportunity to share and express themselves. Session will wrap-up with collaborative goal-setting for more effective connection and communication.

## When OCD Wants to Go to School with You *Quartz A-B*

**Natasha Daniels, LCSW**, *ATParentingSurvival.com*

Does OCD come to school in your backpack? Ugh, who needs a companion like that! In this workshop we'll talk about the ways OCD wiggles into your school day and some fun ways to send it packing!



**4:15pm–5:45pm**

**IOCDF Keynote: OCD: A Family Affair**  
Centennial D-G

**The Kinberg Family**



Toby



Oliver



Mali



Simon

We never truly experience anything in isolation. Family members and loved ones who surround us — though perhaps not the ones diagnosed with OCD — often have their own intimate journeys with the disorder. The Kinberg family will talk with us about their family’s experience with OCD. Teen Toby, younger brother Oliver, and parents Mali and Simon Kinberg will take the Keynote stage to share their joint experience of living with OCD.

Simon is an Oscar and two-time Emmy Nominee who has established himself as one of Hollywood’s most prolific filmmakers, having written and produced projects for some of the most successful franchises in the modern era (*The Martian*, *X-Men: First Class*, *The 355*, *Invasion*). Dr. Mali Heled Kinberg currently teaches as a UCLA professor for both the the film and television programs, and the Anderson business school. Toby Kinberg is a rising high school junior in Los Angeles who recently published a children’s book entitled *Meven*, a story about a young boy named Kevin who must face his fears as he battles scary monsters while climbing up Mount Meven. Toby’s hope in writing this story is to inspire readers to be able to confront their fears and overcome them. Oliver Kinberg is a rising seventh grader. He plays basketball and tennis, loves the Lakers and lives in LA with his mother and older brother, Toby.

**4:15pm–5:45pm**

**Youth Keynote Alternative: Dance Like No One's Watching!**

Youth (18 and below) **Agate A-C**

**Molly Martinez, PhD**, *Specialists in OCD & Anxiety Recovery (SOAR)*; **Justin Hughes, LPC**, *Dallas Counseling*



Calling all awkward dancers and tone deaf singers to our all-ages youth dance party and sing-along, where facing your fears is made fun! Come learn how to sing and dance badly as you kick OCD and anxiety to the curb. Whether you are facing your fears by simply stepping on the dance floor, trying a new dance move, belting off-key into the mic, or singing the lyrics of a song that make you uncomfortable, we are ready to customize this experience to challenge you, help you grow, and make you laugh! Message Molly Martinez through the Conference app ASAP to confidentially request specific songs and exposure opportunities. (Masks and other COVID precautions will be strongly encouraged during this interactive event.)

**AWARD PRESENTATIONS**



**PATRICIA PERKINS IOCDF SERVICE AWARD**

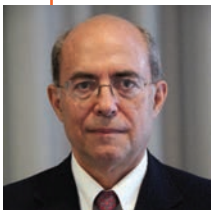
*This award is intended to honor any professional or IOCDF member who has stood out as a long-time and active contributor to the IOCDF.*

**Sabine Wilhelm, PhD**

Dr. Wilhelm is the Chief of Psychology and Director of the Center for OCD and Related Disorders at Massachusetts General Hospital and a Professor at Harvard Medical School. Her research focuses on the development, testing, and dissemination of treatments for OCD and related disorders. Dr. Wilhelm has been the principal investigator or site principal investigator of seven NIMH-funded research grants and

many other grants. She has over 200 publications on the cognitive functioning, prevalence, and treatment of OCD, body dysmorphic (BDD), and tic disorders and has published seven books on these disorders as well.

For many years, Dr. Wilhelm has served in multiple leadership roles at the IOCDF. These include serving as the Vice Chair of the IOCDF's Scientific and Clinical Advisory Board (SCB), Chair of the Research Grant Review committee and Research Grant Policy committee, and Vice Chair of the SCB Nominating committee. She has always been a committed and generous member of the OCD professional community as a mentor, a Conference presenter, a pivotal member of our BDD Special Interest Group (SIG), and a regular attendee of IOCDF events, such as the OCD Walk.



**IOCDF OUTSTANDING CAREER ACHIEVEMENT AWARD**

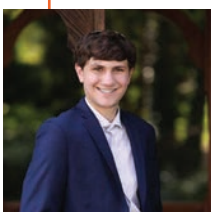
*This award is intended to highlight the significant and notable contributions of a professional in the field of OCD and related disorders.*

**James F. Leckman, MD, PhD**

Dr. Leckman is one of the world's foremost researchers on OCD and Tourette Syndrome. He is the Neison Harris Professor of Child Psychiatry, Psychiatry, Psychology and Pediatrics at Yale and, for more than 20 years, he has served as the Director of Research for the Yale Child Study Center. Dr. Leckman is also the Deputy Training Director

of the Albert Solnit Integrated Child, Adolescent, and Adult Psychiatry Program at Yale. He has trained psychiatrists, psychologists, medical students, and research scientists for over 30 years at Yale and its Child Study Center.

His research on OCD and tic disorders has included studies of phenomenology, natural history, neurobiology, genetics, risk factors, immune factors, and treatment. One of his most significant contributions was to develop the dimensional model of OCD, demonstrating that OCD had 4-5 major symptom factors or dimensions. Dr. Leckman is the author or co-author of over 430 original articles published in peer-reviewed journals, 12 books, and 140 book chapters. He is one of the world's most highly cited researchers and authors.



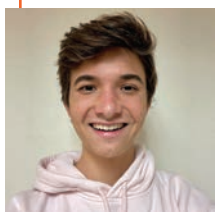
**IOCDF YOUTH HERO AWARD, Presented by UNSTUCK: an OCD kids Movie**

**Alex Rosenberg**

Alex was diagnosed with OCD when he was 10 years old and just graduated from high school. He has been an active advocate from an early age, including putting together his own educational fliers on OCD for distribution at his school. At one of his first Annual OCD Conferences, he sought out IOCDF National Advocate, Ethan

Smith, to ask how we could do more to make sure everyone could get treatment (he was still in middle school at the time!). Now, Alex serves as an incredibly active and positive IOCDF Advocate, with a particular commitment to our faith and OCD initiatives. Alex is a leader in the Faith and OCD Special Interest Group (SIG) and he never misses a meeting. He has spoken on multiple live streams on the integration of his Jewish faith with treatment while utilizing Jewish texts and his collaboration with his rabbi. After every live stream, we receive multiple messages talking about the impact of Alex's advocacy as a young person! Alex was also a speaker at the Faith and OCD Conference this past May, the 2021 Online OCD Conference, as well as the Denver Annual OCD Conference.

## AWARD PRESENTATIONS

**HERO AWARD**

*This award is intended to recognize an individual who has stood out as an exemplary advocate for their contributions to the OCD and related disorders community.*

**Kyle King**

While in high school in South Florida, Kyle started an OCD support group for him and his peers. Although he has graduated, he continues to run this support group virtually to support his hometown OCD community. Now in college at Yale University, Kyle interns at the Yale OCD Research Clinic with a passion for aiding in the advancement of OCD and related disorders research. His own research focuses on the therapeutic benefits of sharing OCD symptoms with friends. He also spent a summer as an intern at Biohaven Pharmaceuticals, working on their OCD clinical trial.

In addition to his own personal advocacy, Kyle is currently an IOCDF Advocate as well. He started volunteering his time for the Foundation by serving as a head counselor for the teen's group in the IOCDF's OCD Camp, as well as being part of the OCD Camp's planning committee. With a passion for offering support to his peers with OCD, Kyle is one of the Young Adult Special Interest Group (SIG) leaders. For the SIG, he organizes and hosts monthly virtual young adult meetups, and he helps oversee the Young Adult Track at the Annual OCD Conference. Finally, Kyle started a monthly, virtual Research Roundtable with Dr. Jon Abramowitz, that focuses on sharing current OCD research in a manner digestible to the average individual.

5:45pm–7:00pm

## Researcher and Exhibitor Meet & Greet

Exhibit Hall

sponsored by Pathlight Mood & Anxiety Center



The Researcher and Exhibitor Meet & Greet is a unique opportunity to meet the leaders in the field of OCD and Related Disorders. Scientists will be on hand to present and discuss cutting-edge research in a poster session format, allowing attendees to engage one-on-one with nearly 40 veteran researchers, students, and

trainees. A complete, numbered guide to their posters can be found on pages 20-23. Immediately adjacent to the research posters, you will find our Conference exhibitors. Find a complete listing of exhibitors on pages 14. This event is a special opportunity to meet and network with many of the people who make the Annual OCD Conference possible — don't miss it!



## Keynote Q&A Session

Join the Kinberg family, following their Keynote Address, in the exhibit hall during our Researcher and Exhibitor Meet and Greet. The Kinbergs are happy to answer any questions attendees may have and Toby will be available to sign copies of his book *Meven*.

*Light snacks will be served*

7:00pm–10:00pm

## OCD Conference Party! Dare to Do Denver!

Centennial Ballroom D-H, Third Floor

We're back in person after three years away! What better way to celebrate coming together again for the Conference weekend than an official OCD Conference party? This year, we are changing it up and will have a full live band, interactive experiences, and lots of other Denver-themed fun. Come see the IOCDF Community in

action and be a part of this exciting night! Our emcee for this year's OCD Conference Party is IOCDF National Advocate, Ethan Smith. Ethan will be acknowledging our 2022 Hero award winner: Kyle King and Alex Rosenberg, recipient of the Youth Hero Award, Presented by UNSTUCK

*Light dinner will be served.  
Cash bar.*



# SATURDAY EVENING

6:00pm–7:30pm

## JUST WRITE with Not Alone Notes Exhibit Hall

**Lisa Giuffre**, *Not Alone Notes*; **Molly Fishback**, *Not Alone Notes*

Not Alone Notes mails handwritten and handmade cards to individuals with OCD and related disorders year-round to remind others they aren't alone, encourage hope, and dispense resources. We have mailed over 2,000 cards around the world! Similarly, each holiday season, the IOCDF collects handwritten cards to distribute specifically to individuals in OCD treatment programs. With this spirit in mind, we want to come together and write cards at #OCDcon to send to individuals in OCD treatment programs again. Write a message, craft a poem, or draw a picture! Individuals with OCD, family members, and professionals are invited to write with us! Supplies will be provided. BYOS (Bring Your Own Stickers)

## Young Adult Regional Meet-up Granite A-C

**Darcy Howell**, *A Penny For Your Intrusive Thoughts*; **Kyle King**

Individuals with OCD often have a hard time finding local support and resources in their areas. This support group will break up attendees into regional groups to address this issue. Participants will have the opportunity to meet those with OCD from their areas, forming a community that can continue beyond the conference. Participants also can connect with regional facilitators who will provide local resources, including information on IOCDF affiliates and local support services. Those in attendance will be encouraged to maintain the support they formed with fellow attendees following the conference. Regions represented will include the Northeast, Southeast, Midwest, West Coast, International, and the Greater Toronto Area.

## Turning the Table: Parent Exposures Quartz A-B

**Nicole Bosse, PsyD**, *Lindner Center of Hope*; **Jennifer Wilcox, PsyD**, *Lindner Center of HOPE*; **Lindsey Conover, PhD**, *Lindner Center of Hope*

This evening activity will be a great way for kids and parents at the conference to get to know each other, challenge their parents, engage in exposures, and have fun! This activity will allow kids to turn the table on their parents and help guide them through exposure challenges. Kids will be able to help their parents face their fears and show them how rewarding it can be to stand up to anxiety. Parents will be put in their kids shoes and learn how much courage it takes to face their fears. This will be a fun, interactive activity for all kids and parents at the conference, with or without OCD.

8:00pm–9:30pm

## Support Group for Family Members of Those with Hoarding Disorder Capital 5-7

**Greg Chasson, PhD**, *Illinois Institute of Technology*

This is a hoarding support group for family members of those with hoarding disorder. The group will be co-facilitated by a professional and a family member with lived experience. We will discuss strategies to help family members better recognize hoarding disorder symptoms and support those they care for who are struggling with the condition and/or with treatment.

## Arrested Development Support Group Granite A-C

**Justin Nichols**, *OCD Peer Support*; **Shanda Curiel, PsyD**, *Allay OCD, LLC*

Many times, individuals with OCD will defer engaging in major adult milestones, making major life decisions, and/or taking action towards life goals. Examples of significant experiences are dating and sex, commitment/marriage, having children, choosing a career path, travel, or hobbies. This group discussion will entail topics of shame from having OCD or ugly intrusive thoughts, fears one might act on unwanted thoughts, persistent doubt about making a decision and risking regret, and avoidance.

## Responding to Faith Challenges - Scrupulosity OCD Support Group Agate A-C

**Allyson Guilbert, LCSW**, *Mindset Family Therapy*; **Annabella Hagen, LCSW**, *Mindset Family Therapy*

How can I know if a situation is scrupulosity OCD and not a real faith challenge? This is a common question you may have asked yourself. What is your usual response? Your scrupulous mind loves to be involved in matters that are most important in your life. The urge to internally solve your dilemma may be logical, but is it helpful? What happens when you start dissecting your thoughts related to your faith? In this psychoeducation and support group, we will discuss how to respond to your mind's unhelpful advice. We will identify ways you can align your faith and life's values so you can focus on what truly matters to you each day.

## Saturday Night Game Night Quartz A-B

**Kyle King**; **Megan Dailey**

Maybe big gatherings aren't your thing and tonight, you'd really rather just hang out with the Young Adult friends you've made this year in a more relaxed setting. If so, come to the Saturday night hangout! Similar to last night, this session provides a place for young adults to go after a long day at the conference, a place to play cards, chat, and continue building a community. Like last night, some games will be run by Young Adult advocates, but this event is mostly a chance to connect rather than anything too formal. Only one rule - young adults only!

6:00pm–7:30pm

## Navigating Family Life with a BDD Sufferer Support Group Mineral D-G

**Denis Asselin**

Given the intensity of BDD, it takes plenty of compassion, resilience, creativity, and love for partners, parents, and siblings to live at home with a BDD sufferer. What can caregivers do daily to navigate these troubled waters and be supportive while still maintaining composure and inner peace? It's too easy to push personal needs aside and focus entirely on the challenge. In this forum, we will share stories of our successes and shortcomings, focusing primarily on how we take care of ourselves so that we can become more effective caregivers. Compassionate self-care is key to a sustainable approach to this demanding disorder.

## Support Group for Body Dysmorphic Disorder (BDD) Capital 5-7

**Eva Fisher, PhD**, *Colorado State University Global*

Peer support is valuable for people with BDD since sharing similar experiences and giving/receiving support can make people feel less alone. The IOCDF Annual Conference BDD support group provides an opportunity to meet others who truly understand the torment caused by this underrecognized disorder: fellow BDD sufferers. This is a safe, confidential environment where people are free to share their concerns and to give and receive support, all without judgment. The group is led by a peer support specialist who has recovered from BDD. Please join us!

## OCD and the Transition to College Agate A-C




**Sivan Komatsu**, *University of Washington*

The transition to college is a challenge for anybody, and when you throw OCD into the mix, it's a whole different ballgame. During this evening activity, teenagers with OCD and related disorders who plan on attending college will be given the opportunity to talk through some common OCD-related fears of incoming college students, such as requesting accommodations, disclosing diagnoses to professors, accessing on- and off-campus mental health resources, and more. Through this interactive workshop, attendees will be given tools and strategies to navigate all aspects of the transition to college so that they can remain in control of their education, their futures, and most importantly, their mental health.

# SUNDAY SCHEDULE

## OVERVIEW

SUNDAY, JULY 10

<p><b>7:00am–8:00am</b></p>	<p><b>Light Breakfast</b>  <i>Exhibit Hall, Capital Ballroom 1-4 and Foyer, Third Floor</i></p> <p>The Conversation Cafe is back! High-top tables will be scattered throughout the rear of the Exhibit Hall. Tables will be assigned specific themes and topics to help attendees connect with similar experiences and meet new people.</p>	 <b>Breakfast</b>
<p><b>7:00am–11:30pm</b></p>	<p><b>Exhibit Hall Open</b>  <i>Exhibit Hall, Capital Ballroom 1-4 and Foyer, Third Floor</i></p> <p>OCD Conference Bookstore            Art Gallery            IOCDF Information &amp; Welcome Booth  <i>See page 14 for a list of Exhibitors</i></p>	
<p><b>7:00am–1:00pm</b></p>	<p><b>Conference Info Desk Open</b>  <i>Centennial Foyer, Third Floor</i></p> <p>Onsite Registration Open</p>	
<p><b>7:00am–1:00pm</b></p>	<p><b>Continuing Education Desk Open</b>  <i>Centennial Foyer, Third Floor</i></p> <p>All professional attendees registered at the Therapist/Clinician level seeking to earn continuing education (CE) credit must sign in and out at the start and end of each day, the exception being Psychologists who will need to check-in to each session attended. See page 6 for CE/CME information.</p>	 <b>Bookstore</b>
<p><b>8:00am–1:00pm</b></p>	<p><b>Conference Presentations</b>  <i>See pages 60-63 for a full schedule of presentations.</i></p>	
<p><b>8:00am–1:00pm</b></p>	<p><b>Youth Programming</b>  <i>Elementary: Quartz A-B, Third Floor</i>  <i>Middle Schoolers: Granite A-C, Third Floor</i>  <i>High Schoolers: Agate A-C, Third Floor</i>  <i>See page 27 for a full schedule of activities and pages 60–63 for details.</i></p>	

## PRESENTATION TRACKS

These tracks are intended to help you decide which presentations may be the most appropriate for you, but all of our presentations are open to all attendees. Seating at all presentations is on a first-come, first-served basis.

- EVERYONE**
- \*Presentations are eligible for CE/CME credits.
- LIVING WITH OCD**
- THERAPISTS**
- PARENTS & FAMILIES**
- RESEARCH TO CLINICAL PRACTICE**

8:00AM–9:30AM

9:45AM–11:15AM

11:30AM–1:00PM

EVERYONE

**RESPONDING TO RUMINATION: THE PERSEVERING PRIVATE COMPULSION**  
Allyson Guilbert, LCSW; Annabella Hagen, LCSW; Jon Case, LCSW  
*Centennial B*

**NAVIGATING LIFE AFTER TREATMENT: CHALLENGES AND TRIUMPHS**  
Micah Howe; Brittany Stahnke Joy, DSW, LCSW, MFT; Christopher Weston, MPH, AMFT; Mackenzie Reed, RN; Sivan Komatsu  
*Centennial C*

**LIVING WITH OCD AND A CHRONIC PHYSICAL ILLNESS**  
Dee Franklin, PsyD; Kathryn Blalock; Katia Moritz, PhD; Bobbye Dieckmann; Ginny Bailey  
*Centennial C*

EVERYONE

**NON-TRADITIONAL RELATIONSHIP OCD: WHEN IT'S NOT JUST ABOUT YOUR ROMANTIC PARTNER**  
Carly Samach, LMHC; Caryn Gill, LPC; Jenna Overbaugh, LPC  
*Mineral B-C*

**GENDER IDENTITY OCD 101: UNDERSTANDING WHAT IT IS AND WHAT TO DO ABOUT IT**  
Laura Lokers, LMSW  
*Centennial*

**RELIGIOUS SCRUPULOSITY IS AN OCD ISSUE... NOT A FAITH ISSUE**  
Mubeena Mirza, LCSW; Jedidiah Siev, PhD; Justin Hughes, LPC; Katie O'Dunne, MDiv; Patrick McGrath, PhD  
*Capital 5-7*

EVERYONE

**THE FREEDOM BATTLE: OCD AND SPORT**  
Cali Werner, LCSW; Danielle King, CSCS, MAT; Evelyn Stewart, MD; Thomas Smalley, CSCS  
*Centennial F*

**REAL EVENT OCD: BUT IT REALLY HAPPENED!**  
Amanda Petrik-Gardner, LCPC; David Anderson, LCPC; Shauna Meier, LCSW  
*Centennial G-H*

**DEATH OCD: THE ULTIMATE UNKNOWN**  
Amanda Petrik-Gardner, LCPC; Blake Cranmer, LCSW; David Anderson, LCPC; Krista Reed, LCSW  
*Centennial B*

LIVING WITH OCD

**KILLING IT WITH EXPOSURE: A WORKSHOP FOR HARM OCD**  
Jamie Hallowell; Jennifer Hilbert, LPC; Shannon Weise, LCSW  
*Capital 5-7*

**PUTTING PERSEVERATION TO BED: BREAK THE CYCLE OF SLEEP DISTURBANCE AND REPETITIVE NEGATIVE THINKING**  
Jacob Nota, PhD  
*Mineral D-G*

**WHAT IF EVERY EXPOSURE IS A 10/10: HOW TO EVOKE CURIOSITY AND WILLINGNESS TO TOLERATE DISTRESS**  
Alejandra Sequeira, PhD; Bridget Henry, PhD; Emily Bailey, PsyD; Melissa Fasteau, PsyD  
*Mineral B-C*

PARENTS AND FAMILIES

**THIS IS US: SIBLINGS**  
Charlotte Baier; Matthew Witkin; Michelle Witkin, PhD; Selena Trondsen; Siddarth Agrawal  
*Centennial*

**HAVE I REALLY LISTENED? HOW TO BE EMPATHIC WHILE FEELING DEFEATED BY YOUR LOVED ONE'S OCD**  
Allison Bonifay, LPC; Hayley Dauterman, PhD; Julie Kelly; Kevin Ashworth, LPC; Myles Rizvi, PsyD  
*Centennial D*

**PREPARING TO LEAVE THE NEST: FACILITATING A HEALTHY TRANSITION TO ADULTHOOD WHEN MANAGING OCD**  
Alexander Rosenberg; Brad Hufford, LCSW-C; Deborah Topol, MD  
*Centennial D*

THERAPISTS ADVANCED

**WHEN YOU'VE KNOWN THE PATIENT LONGER THAN YOUR SPOUSE: MANAGING MOTIVATION, ATTENDANCE, AND OUTCOMES**  
Alec Pollard, PhD; Charles Mansueto, PhD; Fred Penzel, PhD; Patrick McGrath, PhD; Renae Reinardy, PsyD  
*Mineral D-G*

**OCD TREATMENT FOR AUTISTICS THROUGH NEURODIVERSE COLLABORATION: WHAT I WISH MY THERAPIST KNEW**  
Max Wilson; Rebecca Sachs, PhD  
*Centennial B*

**WHY SOME PEOPLE WITH OCD DON'T SEEK HELP: UNDERSTANDING RECOVERY AVOIDANCE**  
Alec Pollard, PhD; Alison Menatti, PhD  
*Mineral D-G*

THERAPISTS ADVANCED

**SUD TREATMENT AND ACCEPTING WHAT WE CANNOT CHANGE: THE ROLE OF ACCEPTANCE IN TREATING OCD AND SUD**  
Lauren Rosen, LMFT; Stacey Conroy, LICSW, MPH  
*Centennial D*

**WORKING WITH SCRUPULOUS INDIVIDUALS: A FORUM FOR CASE CONSULTATION AND CONVERSATION**  
Alec Pollard, PhD; Jedidiah Siev, PhD; Ted Witzig, Jr., PhD  
*Capital 5-7*

**EXPOSURES FOR TABOO OBSESSIONS: WALKING THE LINE BETWEEN TOO FAR AND NOT FAR ENOUGH**  
Elizabeth Garis, MEd; Megan Barthe-Herrera, PhD, PMH-C; Miranda Higham, MS; Robert Henderson, PhD  
*Centennial F*

THERAPISTS ADVANCED

**TREATING OBSESSIVE COMPULSIVE PERSONALITY DISORDER (OCPD) WITH CBT: A LIVE DEMONSTRATION**  
Anthony Pinto, PhD; Michael Wheaton, PhD  
*Centennial G-H*

**HOW TO MAKE A PB&J SANDWICH AND OTHER FLEXIBILITY TOOLS FOR GETTING UNSTUCK**  
Anna Korbel, LSW; Emily Hemendinger, LCSW, MPH; Stephanie Lehto, PsyD  
*Mineral B-C*

**"JUST RIGHT" OCD: IMPERFECT!, INCOMPLETE!, CROOKED!, ASYMMETRICAL!, DISORGANIZED!, SLOPPY!, WRONG!**  
Charles Mansueto, PhD  
*Centennial G-H*

RESEARCH TO CLINICAL PRACTICE

**AUTOANTIBODIES AGAINST THE DOPAMINE RECEPTORS DEFINE PANDAS/PANS VERSUS MOVEMENT DISORDERS**  
Chandra Menendez, PhD  
*Centennial A*

**ERP FOR EVERYONE: RESULTS FROM TELETHERAPY IN THE LARGEST TREATED COHORT OF OCD PATIENTS TO DATE**  
Jamie Feusner, MD; Nicholas Farrell, PhD  
*Centennial A*

**GETTING RUBBED THE WRONG WAY: WHAT PARENTS AND CLINICIANS SHOULD KNOW ABOUT SENSORY DYSREGULATION**  
Fred Penzel, PhD; Jenny Yip, PsyD; Jonathan Hoffman, PhD; Robert Hudak, MD  
*Centennial A*

## 8:00am–9:30am

### SUD Treatment and Accepting What we Cannot Change: The Role of Acceptance in Treating OCD and SUD\* *Centennial D*

**Lauren Rosen, LMFT**, *Center for the Obsessive Mind*; **Stacey Conroy, LICSW, MPH**, *VHA*  
How does the use of substances impact OCD? Substance use can be viewed as a safety behavior, or it may be a co-occurring primary diagnosis with negative consequences directly related to the use of substances. We will explore the role of acceptance along with concept of being open to uncertainty in the treatment of both OCD and SUD. We will explore the similar aspects between the two disorders, along with treatments utilizing ACT, ERP, and the role of Harm Reduction in the recovery process for OCD/SUD.

### Killing It With Exposure — A Workshop for Harm OCD *Capital 5-7*

**Jamie Hollowell; Jennifer Hilbert, LPC**, *Annville Psychological Services*; **Shannon Weise, LCSW**, *The Anxiety & OCD Treatment Center of Central Pennsylvania*

This presentation/group activity will involve a discussion of harm OCD and case examples. Jennifer Hilbert will provide a brief overview of Exposure and Response Prevention and its application to Harm OCD. Shannon Weise will provide a video clip of a past client discussing his treatment experience and OCD. Jamie Hollowell will share her story of having Harm OCD and treatment. We will then role play an example of Harm OCD exposure with an audience member. Participants will be encouraged to support one another through exposure exercises and will be broken into smaller groups to practice exposures with the assistance of Shannon, Jennifer, and Jamie. We will return and process as group before ending our session.

### Treating Obsessive Compulsive Personality Disorder (OCPD) with CBT: A Live Demonstration\* *Centennial G-H*

**Anthony Pinto, PhD**, *Northwell Health OCD Center - Zucker Hillside Hospital*; **Michael Wheaton, PhD**, *Barnard College*

Obsessive compulsive personality disorder (OCPD) is a chronic maladaptive pattern of excessive perfectionism, preoccupation with orderliness/detail, and need for control over one's environment that frequently co-occurs with OCD and complicates its treatment. Despite its prevalence, many clinicians are not aware of how to treat OCPD. Drs. Pinto and Wheaton will present a hands-on, straightforward approach to understanding and treating these patients. They will use role plays to demonstrate components of cognitive behavioral therapy with this population, including setting the stage for treatment, using metaphors to increase buy-in, introducing the concept of willingness, decreasing reactivity to triggers, and applying exercises to increase willingness and practice flexibility. Finally, the presenters will answer questions on the challenges of working with these patients.

### When You've Known the Patient Longer Than Your Spouse: Managing Motivation, Attendance, and Outcomes\* *Mineral D-G*

**Alec Pollard, PhD**, *Saint Louis Behavioral Medicine Institute*; **Charles Mansueto, PhD**, *Behavior Therapy Center of Greater Washington*; **Fred Penzel, PhD**, *Western Suffolk Psychological Services*; **Patrick McGrath, PhD, NOCD**; **Renae Reinardy, PsyD**, *Lakeside Center for Behavioral Change*

No matter how long we have been treating OCD, we all have a few patients that remain stuck in their OCD. They may have been to IOP, PHP, Residential Treatment, or have even undergone surgical procedures as a way to challenge their OCD, but they continue to have some fundamental struggles with moving the needle and staying focused in their OCD. While this is frustrating for us as therapists, we have not given up on them. In this talk we will review how we continuously try to motivate our patients to move the needle, and ever try to make incremental changes in their lives, always hoping to find a new way to motivate them to do their ERP.

### This is Us: Siblings *Centennial C*

**Charlotte Baier, UNSTUCK: an OCD kids movie**; **Michelle Witkin, PhD**; **Matthew Witkin; Selena Trondsen**, *The Gateway Institute*; **Siddarth Agrawal**

A sibling can be a best friend and the biggest advocate. We can be a trigger for OCD and the obsession or compulsion. When someone in the family is diagnosed with OCD, siblings can bear the brunt of the obsessions and compulsions. We can also play a powerful role in therapy. Through personal stories, this therapist-led sibling Q&A will share productive and actionable ideas to get siblings involved. We'll connect our sibling community, ask and answer questions, and discuss ways you, as a sibling, can support your family and those with OCD.

### Autoantibodies Against the Dopamine Receptors Define PANDAS/PANS versus Movement Disorders\* *Centennial A*

**Chandra Menendez, PhD**, *University of Oklahoma Health Sciences Center*

Childhood infections and their autoimmune sequelae are linked to abnormal movements, behaviors, cognitive or emotional dysfunction, potential underpinnings of children with tics, and OCD. Developing new therapies is a challenge, thus our work aims to identify treatable symptoms in autoimmune neuropsychiatric disorders. We investigate how anti-microbial autoantibodies (AABs) target neural antigens and impact neuronal activity. We identify immune subtypes of BGE and separate their neurologic sequelae often associated with streptococcal or upper respiratory tract infections. AABs activate the dopamine receptor 1 (D1R) in neuropsychiatric syndromes that manifest as tics and OCD and the dopamine receptor 2 (D2R) in choreiform disorders. We report a novel mechanism for behavioral dysfunction in BGE neuropsychiatric sequelae where autoantibody targeting leads to dopaminergic signaling abnormalities.

### The Freedom Battle: OCD and Sport *Centennial F*

**Cali Werner, LCSW**, *McLean OCD Institute / Houston*; **Danielle King, CSCS, MAT**; **S. Evelyn Stewart, MD**, *University of British Columbia*; **Thomas Smalley, CSCS**

According to Cromer et al. (2017), an OCD diagnosis is nearly twice as likely for a competitive athlete (5.2%) than for the general population (2.3%). Regardless, we know that gold-standard ERP treatment remains the same for both athletes and non-athletes. OCD relapse prevention is not discussed as much as it should be, especially in the world of sport. What does an OCD prevention lifestyle in sport actually look like? This discussion will include expert clinicians and advocates that understand ERP from the clinical and/or personal lens. Specifically, we will discuss the post-treatment transition from daily scheduled exposure work to making conscious choices against OCD in the world of sport that can leave one feeling empowered, bold, brave, and free.

### Responding to Rumination: The Persevering Private Compulsion *Centennial B*

**Allyson Guilbert, LCSW**, *Mindset Family Therapy*; **Annabella Hagen, LCSW**, *Mindset Family Therapy*; **Jon Case, LCSW**, *Mindset Family Therapy*

When OCD is causing havoc in your life, your natural reaction is to find relief from the distress. Ruminating (arguing, judging, justifying, time traveling, and figuring things out) to find relief seems to be the easiest option. Often times, your awareness when giving in to this private compulsion may be absent until you are seized by severe anxiety, depression or a panic attack. During this workshop, you'll receive and apply simple awareness skills you can practice throughout your day. As you continue practicing awareness skills, you'll be surprised how flexible you can become with your thoughts, feelings, and urges before surrendering to this challenging compulsion. You can choose to do what matters most, right here, right now!

### Non-Traditional Relationship OCD: When It's Not Just About Your Romantic Partner *Mineral B-C*

**Carly Samach, LMHC, NOCD**; **Caryn Gill, LPC, NOCD**; **Jenna Overbaugh, LPC**

Relationship OCD is one subtype of OCD that has gained much more research and clinical attention within the past several years. Most often, individuals who struggle with relationship OCD identify obsessions and compulsions with their romantic partner. But is relationship OCD only about the romantic partner? What about when individuals also obsess and ritualize with other important relationships in their lives, such as their pets, their children, their friends, or their family members? This presentation will discuss the need to broaden our understanding of relationship OCD and to talk about it as having to do with relationships in general - not just those of the romantic kind.

### Removing the OCD from Social Media: How to Have More Social and Less Media *Agate A-C*

**Emily Hemendinger, LCSW, MPH**, *CU Anschutz*; **Stephanie Lehto, PsyD**, *University of Colorado*

Have you ever been caught up in a compulsion around social media? The need to know or check? Are you comparing yourself to others or worried about missing something? Do you find yourself scrolling for hours to avoid intrusive thoughts? Do you avoid social media because you are afraid of what you will learn or post? Social media can be an excellent tool for connection and finding helpful mental health resources. However, it also has a dark side and can even be part of compulsions. This interactive presentation will encourage you to explore your relationship with social media, how it interacts with your OCD and anxiety, and how you can use social media in a mindful instead of mindless way.

## Outsmarting your OCD: Dodging Traps & Preventing Relapse

Granite A-C

**Kyle King; Marni Jacob, PhD, Jacob Center for Evidence-Based Treatment; Rebecca Schneider, PhD, Emory School of Medicine, Department of Psychiatry and Behavioral Sciences**

This skill-building session will review skills to help in your journey against OCD! We'll focus on: 1) Identifying common traps in OCD so that you can learn not to fall for them, 2) Engaging in cognitive-diffusion of OCD thoughts, 3) Relapse prevention strategies, including awareness of when you might be more vulnerable to OCD, identifying early warning signs of OCD worsening or if it is trying to pick on you in a new way, and strategies to keep lapses from becoming relapses. To get you pumped up during this morning session, we might even incorporate a game of dodgeball as symbolism for "dodging" away from what OCD wants!

## Silly Voices and Beach Balls! Quartz A-B

Amanda Petrik-Gardner, LCPC

This interactive workshop will provide ACT (Acceptance and Commitment Therapy) skills to children in a fun-filled way! Play-based techniques will be used in order to demonstrate how to defuse, or create some distance, from our stressful thoughts. From talking in silly voices, naming our stories, and bouncing intrusive beach balls, our little ones will walk away with tangible skills in learning how to allow intrusive thoughts to be present.

9:45am–11:15am

## Have I Really Listened? How to be Empathic While Feeling Defeated by Your Loved One's OCD Centennial D

**Allison Bonifay, LPC, NW Anxiety Institute; Hayley Dauterman, PhD, NW Anxiety Institute; Julie Kelly, NW Anxiety Institute; Kevin Ashworth, LPC, NW Anxiety; Myles Rizvi, PsyD, NW Anxiety Institute**

Loving someone living with OCD is easy. Supporting someone living with OCD can also feel exhausting, overwhelming, and painful. At times, the decision to participate in compulsions and offer reassurance rather than help block avoidances or compulsions doesn't feel like a choice. It's survival. Effective treatment for OCD relies on the reduction of family accommodations but that's easier said than done. It can also be confusing to know how to know what's support and what's accommodation. This presentation discusses the power of empathy and connection to the ones we love and the challenge of being empathic while not giving in to OCD's voice. In addition to exploring empathic statements, this presentation will provide tips & tricks on delivering them effectively.

## Working with Scrupulous Individuals: A Forum for Case Consultation and Conversation\* Capital 5-7

**Alec Pollard, PhD, Saint Louis Behavioral Medicine Institute; Jedidiah Siev, PhD, Swarthmore College; Ted Witzig, Jr., PhD, Apostolic Christian Counseling and Family Services**

Many experienced OCD therapists struggle to treat scrupulosity. The symptoms are entangled with religious or moral values that may be unfamiliar to, or not shared by, the therapist. Furthermore, scrupulosity is associated with poor insight and magical thinking, and many common scrupulous obsessional fears are inherently untestable. The purpose of this panel is to create a forum for therapists to discuss and receive feedback from the panelists and other colleagues about challenging scrupulosity cases. In addition to case consultation, we anticipate that the specific issues and challenges that participants raise will catalyze a conversation more broadly about approaches, techniques, and ideas to improve treatment outcome for scrupulous patients.

## Real Event OCD: But It Really Happened!\* Centennial G-H

**Amanda Petrik-Gardner, LCPC; David Anderson, LCPC, Wichita OCD Center; Shauna Meier, LCSW, OCD Kansas**

Obsessions often contain worries about the future and fears about 'what could happen.' So what do you do when your obsession is stuck on the past and something that really did happen? Real Event OCD latches onto our past, causing confusion on how to proceed with treatment. This workshop will look at this theme closer including how to apply the same ERP and ACT skills we already know and love, and the difference between Real Event OCD and trauma, as seen with PTSD.

## Putting Perseveration to Bed: Break the Cycle of Sleep Disturbance and Repetitive Negative Thinking Mineral D-G

**Jacob Nota, PhD, McLean Hospital's OCD Institute/Harvard Medical School**

Disruptions in the amount and timing of sleep are common among individuals with OCD and related disorders. This educational workshop will outline the two-way street between repetitive negative thinking (i.e., worrying, ruminating, obsessing) and sleep disturbances. Attendees will learn about the biological and behavioral systems that control when we feel awake or sleepy; the ways these interact with cognitive and physiological systems associated with OCD and related disorders; and behavioral sleep interventions that have proven to be effective and can be integrated with ongoing cognitive-behavioral therapy. Opportunities to share experiences of sleep in relation to OCD and related disorders and collaborative problem-solving to develop individualized plans for behavioral sleep interventions will be a main objective of the workshop.

## Navigating Life After Treatment: Challenges and Triumphs Centennial C

**Micah Howe; Brittany Stahnke Joy, DSW, LCSW, MFT, Newman University; Christopher Weston, MPH, AMFT; Mackenzie Reed, RN; Sivan Komatsu, University of Washington**

Everyone in the OCD community has a unique story to tell, especially when it comes to their treatment journey and how they navigated life after it. Come hear from 5 individuals who will share their stories! Each panelist will discuss their unique OCD journey, the barriers and challenges experienced, how they addressed and learned from those challenges, and how they are moving forward with what they've learned. You will leave inspired by their diverse journeys and with insights to apply to your own story or that of your loved one.

## ERP for Everyone: Results from Teletherapy in the Largest Treated Cohort of OCD Patients To Date\* Centennial A

**Jamie Feusner, MD, NOCD; Nicholas Farrell, PhD, NOCD**

Exposure and response prevention (ERP) is an effective treatment for OCD yet is underutilized due to scarcity of specialized therapists, geographical location, time commitments, and cost. To address these, NOCD created a digital behavioral health treatment for OCD delivering ERP via video teletherapy with technology-assisted elements including app-based tools and between-session therapist messaging. This study examined outcomes in 3552 adults with OCD, the largest reported treated cohort. Results demonstrated significant improvements for OCD and related symptoms, with gains maintained at 12 months. Results were achieved in less than half the time compared to standard treatment, representing substantial monetary and time savings. We will discuss implications of these findings for service delivery and opportunities for improvements in patient experiences and outcomes.

## Gender Identity OCD 101: Understanding What It Is and What to Do About It\* Centennial F

**Laura Lokers, LMSW, Anxiety and OCD Treatment Center of Ann Arbor**

As societal environments evolve, OCD finds new ways to attack people's lives. Therefore, it's not surprising that a new twist on a common OCD theme is popping up: what if I'm transgender? Conversely, transgender patients might worry about being identifying as the gender assigned at birth. Issues involving the transgender community have established an increasing presence in media and the political arena. In this session, presenters will define Gender Identity OCD (GI-OCD); distinguish between GI-OCD and transphobia and cisphobia; explain the differences between GI-OCD and Gender Dysphoria; dispel myths about GI-OCD; provide an overview of common intrusive thoughts and images; give examples of common physical and mental compulsions; and offer examples of exposures in ERP treatment.

## OCD Treatment for Autistics through Neurodiverse Collaboration: What I Wish my Therapist Knew\* Centennial B

**Max Wilson; Rebecca Sachs, PhD, CBT Spectrum**

Autistic individuals are increasingly seeking CBT with ERP but are often unable to access it. Clinicians may incorrectly think treating OCD+Autism is out of their competency or ERP may not be properly modified for autistics. As a result, clinicians and patients may erroneously consider treatment "a failure" or that the patient "isn't ready" to benefit from ERP. Additionally, patients may experience the burden of "needing to teach" about autism and therapy adaptations. Through interactive discussion and role-play, the panelists—an autistic individual with OCD and a psychologist who treats OCD+Autism—will address knowledge gaps and strategies for collaborative therapy. Role plays will illustrate the "dos" and "don'ts" of therapy modifications and what patients may think during therapist missteps and successes.



## How to Make a PB&J Sandwich and Other Flexibility Tools for Getting Unstuck\* *Mineral B-C*

**Anna Korbel, LSW**, University of Colorado Anschutz Medical Campus; **Emily Hemendinger, LCSW, MPH**, CU Anschutz; **Stephanie Lehto, PsyD**, University of Colorado

People with Obsessive Compulsive Disorder often report getting "stuck" in their thoughts, emotions, and compulsions. Rigid thinking and adherence to routines can be barriers to the treatment of OCD. One way to challenge cognitive rigidity and the "stuck" feeling is by targeting cognitive flexibility. This presentation will explore what cognitive flexibility is and the importance of cognitive flexibility in the treatment of OCD and related disorders. Cognitive flexibility challenges as a form of Exposure Response Prevention will be discussed. Skills and tools for increasing cognitive flexibility/decreasing cognitive rigidity will be presented.

## Meet your DNA-V: A Brief Introduction to Acceptance and Commitment Therapy for Teens *Agate A-C*

**Julie Petersen, MS**, Utah State University; **Michael Twohig, PhD**, Utah State University

Ever been curious about Acceptance and Commitment Therapy (ACT)? This session will introduce DNA-V, a form of ACT specially designed for teens. We will help you meet your DNA-V characters: the Discoverer, Noticer, and Advisor, while orienting to what is most meaningful to you (Values). For each character, we will practice a skill and consider when to use some characters over others. Come prepared to learn about ACT and how it can help you live the life that you want!

## Simon Says, "Touch the Toilet!" Finding OCD ERP Opportunities In Daily Activities and Making it Fun *Granite A-C*

**Alyssa Faro, PhD**, McLean Hospital; **Caitlin White, LICSW**, McLean Hospital; **Maria Fraire, PhD**, McLean Hospital; **Rebecca Schneider, PhD**, Emory School of Medicine, Department of Psychiatry and Behavioral Sciences

Opportunities to practice exposure and response prevention (ERP) to boss back OCD are everywhere if you know how to look for them! Come join this interactive group activity to practice using your creativity and willingness to discover ways to stand up to OCD in well-known games and tasks, no matter what type(s) of OCD symptoms you may have. We will demonstrate this by playing a game of "Simon Says." Presenters and participants will then work together to think of ways to adapt other types of games in a similar way. The group will open with practices and metaphors from Acceptance and Commitment Therapy (ACT) to help set the stage for transforming an ordinary task into a fun ERP challenge.

## Learn How to Spot an OCD Weed and Stop it From Growing! *Quartz A-B*

**Natasha Daniels, LCSW**, *ATParentingSurvival.com*

A big part of staying on top of OCD is pulling out new OCD "weeds" before they grow too big. Would you know if a whole new theme popped up? OCD loves to wear new disguises! After this fun activity you'll be well armed to spot OCD in all of its many disguises.

## 11:30am–1:00pm

### Preparing to Leave The Nest: Facilitating a Healthy Transition To Adulthood When Managing OCD *Centennial D*

**Alexander Rosenberg; Brad Hufford, LCSW-C**, Behavior Therapy Center of Greater Washington; **Deborah Topol, MD**, Medstar Washington Hospital Center

When a child is diagnosed with OCD, there is much the parents often do to help their child manage their condition. This workshop will explore the challenges teenagers and their parents face when dealing with the transition to independence. The workshop will include a presentation on important psychological considerations affecting teenagers and their transitions as well as their challenges in managing their OCD independently. There will be an opportunity to discuss challenging scenarios which can be common to families. The panelists will include a psychologist, a licensed clinical social worker who treats teenagers, a teenager with OCD, and his physician mother. Attendees will end the workshop by listing ways they can help ensure a successful transition as they face adulthood.

## Religious Scrupulosity is an OCD Issue...Not a Faith Issue\* *Capital 5-7*

**Mubeena Mirza, LCSW; Jedidiah Siev, PhD**, Swarthmore College; **Justin Hughes, LPC**, Dallas Counseling; **Katie O'Dunne, MDiv**, Faith & Mental Health Integrative Services; **Patrick McGrath, PhD**, NOCD

OCD loves to latch onto the things most significant to sufferers to get them to pay attention. For many, this relates to their religious or spiritual beliefs. Despite how convincing OCD might seem, OCD is not a faith issue. Rather, OCD is simply attacking your specific beliefs to get you to pay attention. Whether OCD is manifesting in ways that relate to Hinduism, Buddhism, Judaism, Christianity, Islam, and beyond...or your worldview of atheism, agnosticism, or humanism...treatment remains the same. This presentation will focus on the ways that religious scrupulosity manifests in different faith communities, as well as those not involved in communities of faith while reminding us that the evidence-based treatments remain the same regardless of your belief system.

## "Just Right" OCD: Imperfect!, Incomplete!, Crooked!, Asymmetrical!, Disorganized!, Sloppy!, Wrong!\* *Centennial G-H*

**Charles Mansueto, PhD**, Behavior Therapy Center of Greater Washington

Discomfort associated with feelings of incompleteness, imperfection, uncertainty, not-just-right experiences and related phenomena frequently warrant therapeutic attention in patients with diagnosed with OCD. However, similar phenomena are seen in tic disorders, BDD, GAD and others as well. Is it possible that these are actually variations on a theme with more in common than meets the eye? In this novel, integrative model, Dr. Mansueto incorporates biological, developmental and experiential variables as influential in the nature of the motivational forces that are operative in these clinical presentation. The implications of this perspective will be explored with the goals of guiding clinical decision-making and improving clinical outcomes with these patients.

## Why Some People with OCD Don't Seek Help: Understanding Recovery Avoidance\* *Mineral D-G*

**Alec Pollard, PhD; Allison Menati, PhD**; Saint Louis Behavioral Medicine Institute

A substantial portion of individuals with OCD do not seek the help they need. Family and friends struggle to understand why, especially when the OCD negatively impacts their lives. They may wrongfully conclude the OCD sufferer is willfully choosing to be impaired, which can lead them to react in ways that are counterproductive, resulting in substantial family conflict. In this workshop, we will explain why some people behavior in ways that are incompatible with recovery. We will introduce a concept called recovery avoidance and offer suggestions for how to respond to it constructively.

## Living with OCD and a Chronic Physical Illness *Centennial C*

**Dee Frankin, PsyD**, Neuro Behavioral Institute; **Kathryn Blalock; Katia Moritz, PhD**, Neurobehavioral Institute; **Bobbye Dieckmann; Ginny Bailey**

Overcoming OCD is challenging enough, but doing so while also having a chronic physical illness can add an extra layer of complexity. In this panel, you will hear from 3 individuals who live with both OCD and chronic physical condition. You will learn key takeaways from both individual and therapist perspectives, and will come away inspired by the strength, courage, and creativity they found on their own unique journeys.

## Getting Rubbed the Wrong Way: What Parents and Clinicians Should Know About Sensory Dysregulation\* *Centennial A*

**Fred Penzel, PhD**, Western Suffolk Psychological Services; **Jenny Yip, PsyD**, Renewed Freedom Center for Rapid Anxiety Relief; **Jonathan Hoffman, PhD**, Neurobehavioral Institute; **Robert Hudak, MD**, Western Psychiatric Institute and Clinic

Sensory dysregulation is a significant problem, and one that is poorly understood by patients, family, and the medical community at large. Sensory issues can occur as a part of Autism, and OCD or can present by themselves as a stand-alone issue. While research on how to best approach these problems is still limited, the approach and orientation of treatment providers can make or break treatment in our opinion. We plan to discuss and define the sensory dysregulations that are clinically significant, and using cases from our own practices and experience will help define best practices based on our current knowledge.

## Exposures for Taboo Obsessions: Walking the Line Between Too Far and Not Far Enough\* Centennial F

Elizabeth Garis, MEd, University of Florida; Megan Barthle-Herrera, PhD, University of Florida; Miranda Higham, MS, University of Florida; Robert Henderson, PhD, Rogers Behavioral Health - Atlanta

Obsessive compulsive disorder (OCD) often affects the facets of people's lives that are most important to them, which can create a sense of disconnection between the individual and their values. Thus, when treating OCD, it is important to integrate evidence-based practices and patient values to ensure that treatment is effective in reducing OCD symptoms while honoring the individual's beliefs. This is of particular importance when using exposures to treat taboo obsessions (e.g., religious scrupulosity, morality, violence/harm, sexual), and this integration can be difficult to navigate with these types of obsessions. During this presentation, you will learn about taboo obsessions, types of exposures to use in treatment, and ways to center patient values while simultaneously encouraging patients to approach their fears.

## Death OCD: The Ultimate Unknown\* Centennial B

Amanda Petrik-Gardner, LCPC; Blake Cranmer, LCSW, Blake Cranmer Therapy, LLC; David Anderson, LCPC, Wichita OCD Center; Krista Reed, LCSW, A Peaceful Balance, LLC

Raise your hand if you enjoy thinking about death! Well there's not many of us which is why these thoughts become 'sticky,' distressing and often avoided. This workshop will face that fear and review what Death OCD looks and sounds like, possible obsessions, common compulsions, and treatment recommendations. Death obsessions can also intertwine with many other themes such as Religion, Existential, Health, Loss of Impulse Control, and Suicidal OCD, to name a few, so the relationship between these subtypes will be discussed.

## What if Every Exposure is a 10/10: How to Evoke Curiosity and Willingness to Tolerate Distress Mineral B-C

Alejandra Sequeira, PhD, McLean OCD Institute in Houston; Bridget Henry, PhD; Emily Bailey, PsyD, McLean OCD Institute in Houston; Melissa Fasteau, PsyD, The Conative Group

Does ERP sound scary to you? When developing a hierarchy, are you finding yourself/your patient labeling every exposure as a 10 out of 10? If so, this talk is for you! This presentation will discuss how intolerance of uncertainty and distress impedes meaningful changes in treatment and explore ways to overcome this barrier. Experiential exercises will demonstrate how therapists and family members can partner with the individual with OCD and utilize curiosity to enhance their willingness to experience distress. Presenters will outline ways to incorporate members of the individual's support system in their exposure plan and ways they can help facilitate motivation to fight OCD by increasing willingness to become more comfortable with being uncomfortable.

## Conference Wrap-up for Teens! Agate A-C

Meaghan Cleary, LMHC, R-DMT McLean Hospital/OCD Institute

It's time to take stock of everything you have learned and experienced!

## Conference Wrap-up for Middle-Schoolers! Granite A-C

Kat Rossi, LMHC, REAT

It's time to take stock of everything you have learned and experienced!

## Conference Wrap-up for Kids! Quartz A-B

Madeline Conover, LMHC, REAT

It's time to take stock of everything you have learned and experienced!

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# GLOSSARY OF KEY TERMS

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**Acceptance and Commitment Therapy (ACT)** — A form of treatment that seeks to help clients experience obsessions and anxiety, but still continue to move in directions of life that are meaningful. The focus of ACT is learning to behave with flexibility rather than resort to compulsive behavior.

**Accommodation** — When others (family, coworkers, friends, etc.) help a person with OCD to do their rituals (i.e. purchasing paper towels to help with cleaning, aiding in completing rituals, waiting while s/he does her/his rituals, etc.). Although usually well-intended, accommodation actually makes OCD symptoms worse. Family members can be helped by a therapist to learn different ways of being supportive without helping an individual to do their rituals.

**Autism Spectrum Disorders (ASD)** — A broad range of conditions characterized by differences in social skills, communication, thinking, sensory processing, and/or movement, with a spectrum (range or continuum) of symptom types and severities.

**Avoidance Behavior** — Any behavior that is done with the intention of avoiding a trigger in order to not feel anxiety. Avoidance behaviors are treated as a ritual.

**Behavior Therapy** — A type of therapy that applies learning theory principles to current problem behaviors that one wishes to change. As the name implies, the point of intervention is at the behavioral level, with the goal of helping the person to learn to change their problem behavior(s).

**Body Dysmorphic Disorder (BDD)** — Obsessions about a body part being defective in some way, resulting in repeated rituals involving checking, mirror-checking, excessive grooming, and avoidance behaviors. Sometimes individuals with BDD have plastic surgeries relating to their perceived defects, but the relief (if there is any) is short-lived; soon the individual begins worrying again, or the focus of his/her BDD can change to a different body part.

**Body-Focused Repetitive Behaviors (BFRBs)** — BFRB is a general term for a group of disorders that cause people to repeatedly touch their hair and body in ways that result in physical damage. Examples include excoriation (skin picking), trichotillomania (hair pulling), and nail biting.

**Checking Compulsions** — Repetitive checking behaviors in an attempt to reduce the probability that someone will be harmed, or to reduce the probability that one might make a mistake. The checking can be behavioral (i.e. physically returning to a room to check if an appliance is turned off) or it can take the form of a mental ritual (i.e. a mental review in which a person imagines in detail each step s/he took to complete a task).

**Cognitive Behavioral Therapy (CBT)** — A form of therapy that focuses on addressing the ways we think and behave. Exposure with response prevention (ERP), the gold standard treatment for OCD, is a type of CBT.

**Comorbid (“Co-occurring”) Disorder(s)** — Having more than one condition or being diagnosed with more than one disease/disorder. It means that both conditions exist and may interact within the same person at the same time.

**Competing (Alternative) Behaviors** — Used as part of Habit Reversal Treatment for skin picking (excoriation) and hair pulling (trichotillomania), this is an activity that gets in the way of the “habit” (skin picking or hair pulling) that an individual is trying to break. For example, if one is knitting, one is unable to simultaneously pull one’s hair.

**Comprehensive Model for Behavioral Treatment (ComB)** — An evidence-based treatment model for Body-Focused Repetitive Behaviors (BFRBs) that focuses on understanding why, where, and how a person engages in their BFRB so that individualized interventions can be selected to help the person achieve what they want to achieve without engaging in the BFRB.

**Compulsions** — Also known as “rituals,” these are repetitive behaviors or thoughts that follow rigid rules in an attempt to reduce anxiety brought on by obsessions.

**Contamination Compulsions** — These are washing and cleaning behaviors in a particular order or frequency in an attempt to reduce chronic worry about being exposed to germs, becoming ill, and/or infecting other people.

**Contamination Obsessions** — Excessive worries about germs, bodily functions, and illness, and coming into contact with any of them. The risk of contamination is far overestimated, compared to the likelihood of actually getting sick from the feared contamination source.

**Counselor** — This mental health professional has a Master’s degree in counseling psychology. Counselors may be LPCs (licensed professional counselors), LMHCs (licensed mental health counselors), or another designation depending on the state in which they are licensed.

**Dialectical Behavior Therapy (DBT)** — A type of therapy that combines certain techniques from Cognitive Behavioral Therapy (CBT) with the concepts of distress tolerance, acceptance, and mindful awareness.

**DSM-5** — *The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (abbreviated as DSM-5) is the latest version of the American Psychiatric Association’s (APA) classification and diagnostic tool. Mental health professionals use the DSM-5 to help diagnose their clients.

**Emotional Contamination Obsessions** — Worry that one will be contaminated by the characteristics of another person. The person believes that it is possible to “catch” unwanted aspects of a person’s personality, much like how one may catch an illness when exposed to germs.

**Exposure and Response Prevention (ERP)** — The first line treatment for OCD. ERP involves having a person with OCD purposefully trigger an obsession through an “exposure” activity, and then resist the urge to engage in rituals (“response prevention”). This causes an initial burst of anxiety, but gradually, there is a natural decrease in that anxiety, called habituation. ERP is initially done with a behavioral coach/therapist, who assists the person with OCD to resist rituals. Eventually the coaching is phased out, as the person with OCD becomes more able to resist rituals without help.

**Generalization** — The transfer of learning from one environment to another. For example, generalization occurs when a person takes a skill they learn in a therapy session and begins to use it in their everyday life outside of therapy.

**Habit Reversal Treatment (HRT)** — This is the behavioral treatment for Body-Focused Repetitive Behaviors, such as trichotillomania and skin picking. In this treatment, the client becomes more aware of patterns of picking or pulling, identifies the behaviors that bring on the picking or pulling, and then works on developing competing or alternative behaviors to block the destructive habit. For instance, when feeling high levels of anxiety, a hair puller can knit, which keeps both hands occupied and keeps the individual engaged in a relaxing activity when s/he is at a high risk to pull.

**Habituation** — The decrease in anxiety experienced over time after individuals intentionally trigger their obsessions and anxiety (for example, doing an exposure during ERP treatment) without engaging in a compulsive behavior to reduce the anxiety.

**Harm Obsessions** — Worries that one will be harmed, or that others will be harmed, due to intentional or accidental behavior on the part of the person with OCD.

**Hierarchy** — A list of situations or triggers that are ranked in order from easier tasks to more difficult tasks which can be used to organize ERP treatment.

**Hoarding Disorder (HD)** — An OCD-related disorder, HD is a complex problem made up of three interconnected difficulties: collecting items to the point that it impacts the safety of the home and the people who live there, having difficulty getting rid of collected items, and having problems with organization.

**Identity-related Obsessions** — Excessive worries about and/or questioning of aspects of one's identity, such as their gender identity or sexual orientation.

**Illness Anxiety (or Health Anxiety, formerly called "Hypochondriasis")** — A mental health condition where a person experiences excessive worries that they are sick or might become sick, whether or not they are experiencing any symptoms. Illness anxiety also includes worrying that normal body sensations or minor symptoms are signs of serious illness.

**Inhibitory Learning** — Learning which inhibits (or "competes with") previous learning. For example, when you learn something new that contradicts or goes against something you knew before, the new learning stops the old learning from being expressed ("replaces" it). This is an alternative theory to habituation.

**Insight** — For someone with OCD, this is the understanding (when not triggered by an obsession) that one's worry is not realistic. Usually when one is triggered or experiencing high anxiety about an obsession, the level of insight decreases dramatically.

**Intolerance of Uncertainty** — Often thought to be the core of most OCD presentations, it is the anxiety resulting from wanting to be absolutely certain in your areas of concern (e.g. that uncomfortable feeling that drives you to ritualize even when your fear seems unreasonable, because what if this is the rare time it is true).

**"Just Right" Obsessions** — The fear that something bad might happen if a behavior is stopped before it "feels just right." Some people with these obsessions do not worry that something bad will happen; rather, they report that something **MUST** feel right before ending a particular behavior.

**Mental Ritual/Compulsion** — A mental act, done in response to an unwanted obsession, that is completed in order to reduce anxiety. Often a mental ritual/compulsion must be repeated multiple times. It can be a prayer, a repeated phrase, a review of steps taken, a self-reassurance, etc. Mental rituals/compulsions can be so automatic that the individual barely has any awareness of thinking the thought.

**Mindfulness Skills** — Purposefully directing one's attention and focus on the present moment (instead of thinking about the past or future).

**Neuromodulation** — The changing of brain activity via a targeted therapeutic treatment, such as a magnetic field or an electrical current, to a specific area of the brain. Examples of neuromodulation include Transcranial Magnetic Stimulation (TMS), which uses magnetic fields, and Deep Brain Stimulation (DBS), which uses electrical currents.

**Neutralizing Rituals** — When an individual with OCD "undoes" a behavior or thought that is believed to be "dangerous" by neutralizing it (or making it safer/less dangerous) with another behavior or thought.

**Obsessions** — Repetitive intrusive thoughts or images that dramatically increase anxiety. Because the obsessions are so unpleasant, the person with OCD tries to control or suppress the fear through the use of compulsions or avoidance. The more the person attempts to suppress the fear, the stronger and more ever-present it becomes.

**Obsessive compulsive disorder (OCD)** — A disorder of the brain and behavior, causing severe anxiety in those affected. OCD involves both obsessions and compulsions that take a lot of time and get in the way of important activities the person values. People diagnosed with OCD spend over one hour per day struggling with repetitive intrusive thoughts, impulses, and/or behavioral urges that increase their anxiety. They try to control their obsessions with compulsive behaviors (rituals) in an attempt to reduce the anxiety.

**Obsessive Compulsive Personality Disorder (OCPD)** — A personality disorder characterized by extreme concern with orderliness, perfectionism, and control.

**Obsessive Compulsive Related Disorders (OCRDs)** — A variety of mental health disorders that are related to OCD, as outlined by the DSM-5. These include body dysmorphic disorder (BDD), hoarding disorder (HD), and the body-focused repetitive behaviors (BFRBs) of skin picking (excoriation) and hair pulling (trichotillomania).

**Overvalued Ideation** — When the person with OCD puts too much weight on the believability/accuracy of their worry, and thus has great difficulty understanding that the worry is out of proportion to the perceived threat.

**PANDAS/PANS** — Pediatric Autoimmune Neuropsychiatric Disorder Associated with Streptococcus (PANDAS) and Pediatric Acute-onset Neuropsychiatric Syndrome (PANS) are subtypes of OCD in children, in which OCD symptoms appear very suddenly, seemingly overnight. These symptoms are caused by an infection: in PANDAS, it is a *Streptococcus pyogenes* infection (the virus that causes Strep throat), and in PANS, it can be any number of infectious agents.

**Perfectionism** — Unrealistically high expectations about one's performance on any given task. Anything less than 100% perfection is considered a failure. Failure is catastrophic and unbearable. Consequently, perfectionists are paralyzed and sometimes unable to begin a task until the last minute, or are sometimes unable to complete a task entirely.

**Post-Traumatic Stress Disorder (PTSD)** — A mental health condition that may occur after a person has been through and/or witnessed a traumatizing event(s). PTSD symptoms can include intrusive memories about the event(s), avoidance of things that remind the person of the event(s), negative thoughts and feelings, and increased negative reactions to everyday things.

**Psychiatrist** — This mental health professional has completed medical school and has specialized in psychiatry and mental illness. S/he can do therapy and prescribe medicine. If the medical professional ONLY prescribed psychiatric medication and does not do therapy, they may be known as a psychopharmacologist.

**Psychologist** — This mental health professional holds a doctoral degree in clinical or counseling psychology. A psychologist will have a PhD (training in both research and therapy), PsyD (training mostly in therapy), or EdD (training in therapy through a school of education). Psychologists with any of these degrees can provide therapy.

**Real Event (or False Memory) Obsessions** — Excessive worries about things that actually happened in a person's life, including trying to gain certainty about past events and/or concerns that they might have done something wrong, harmful, immoral, etc. Unlike most other OCD subtypes, which typically focus on the future, real event/false memory obsessions focus on the past.

**Reassurance Seeking** — When a person with OCD asks others questions repetitively to reduce his/her anxiety (for example, "Do you think this food is spoiled?" or "Do you think I will get sick?"). Sometimes a person with OCD can get reassurance merely from watching another's facial expression and/or body posture. All reassurance seeking is considered a ritual.

**Relapse Prevention** — A set of skills, both cognitive (involving a person's thoughts) and behavioral (involving a person's actions), aimed at keeping an individual from slipping back ("relapsing") into the use of compulsive behaviors.

**Ritual** — Another word for compulsive behavior, which can be a behavior that others can see, or a hidden or unseen mental behavior. Many mental health professionals will identify anything done on the part of the individual with the intention of reducing one's anxiety as a ritual. For example, although avoidance behavior is done to avoid the trigger altogether, it still is the same as an outright ritual, in that it is an attempt to reduce anxiety.

**Scrupulous (Religious/Moral) Obsessions** — Excessive worries about being moral, or worries about blasphemy (i.e., offending God) and religious themes. The term "scrupulosity" may be used to refer to a type of OCD involving scrupulous/religious obsessions.

**Self-Reassurance** — A thought or phrase said out loud or silently in order to lower one's anxiety (for example, "I'm not going to get sick" or "I would never hurt a child"). This is considered a ritualistic behavior.

**Sexual Obsessions** — Unwanted, taboo sexual thoughts that are repulsive to the person affected. Often, thoughts are sexually aggressive towards a vulnerable population (i.e., children, the elderly, family, or strangers).

**Skin Picking Disorder (also known as Excoriation)** — When a person is unable to stop picking at his/her skin. The skin picking is often pleasurable and soothing. People report doing this behavior when stressed or bored, or in conjunction with BDD symptoms.

**Social Worker** — This individual has a Master's degree in social work and can provide therapy.

**Subjective Units of Distress (SUDs)** — A system that individuals with OCD may be asked to use to rate their anxiety from low to high (for example, having 1 SUD could equal low anxiety, and 10 SUDs is high anxiety). Questions about SUDs are used during ERP exercises to help individuals in treatment become more aware of how and when their anxiety increases and decreases.

**Substance Use Disorder (SUD)** — A mental health disorder in which the chronic use of one or more substances, such as alcohol or drugs (including prescription drugs), causes significant impairment in an individual's daily life, physical health, and mental health.

**Symmetry and Exactness (or "Just Right") Compulsions** — These involve fussing with the position of an object for an extended period of time. The person does not stop the behavior until it "feels right."

**Telehealth** — The delivery or facilitation of health care services through telecommunication or digital communication, such as via phone or internet. In the mental health field, this is sometimes called "telepsychiatry" or "telepsychology."

**Tic** — A sudden, rapid, recurrent non-rhythmic motor movement or vocalization.

**Tic Disorder** — A neurodevelopmental disorder that becomes evident in early childhood or adolescence, consisting of motor or vocal tics.

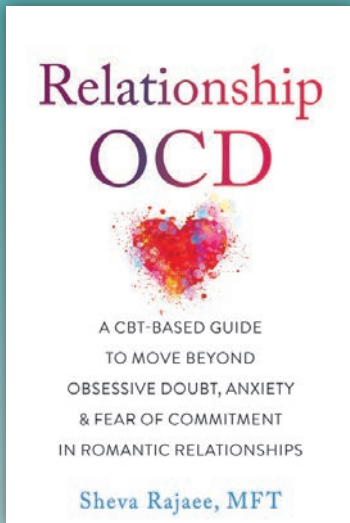
**Tourette Syndrome** — A neurodevelopmental disorder that becomes evident in early childhood or adolescence. It is part of the spectrum of Tic Disorders and is characterized by multiple motor and vocal tics.

**Trichotillomania** (also known as Hair Pulling Disorder) — When a person feels as though s/he is unable to stop impulsively pulling his/her hair from his/her head, eyebrows, eyelashes, arms, legs, or pubic area. The hair pulling is often pleasurable and soothing. People often report doing this behavior when stressed or bored.

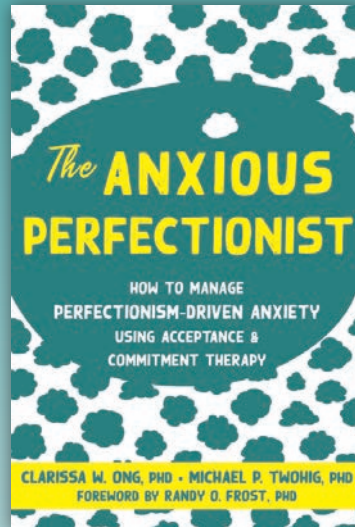
**Trigger** — This can be an external event or object or an internal thought that sets off an obsession.

**Yale-Brown Obsessive Compulsive Scale (Y-BOCS)** — A diagnostic tool that includes a symptom checklist of OCD obsessions and compulsions and a rating scale to measure severity. Usually, people who score over 16 also meet the DSM-5 criteria for OCD. There is a version of this scale made for children called the Children's Yale-Brown Obsessive Compulsive Scale, or the CY-BOCS.

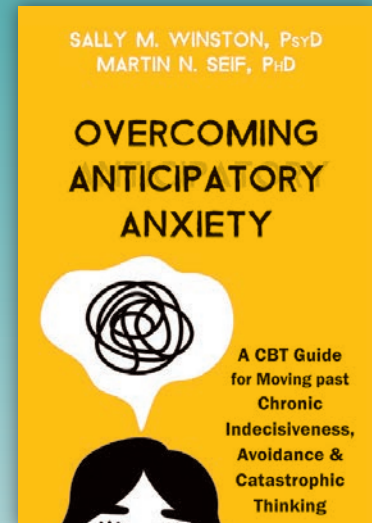
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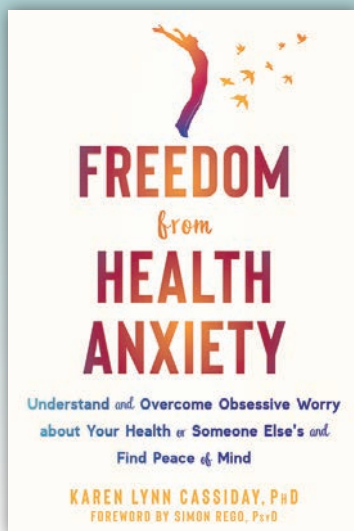
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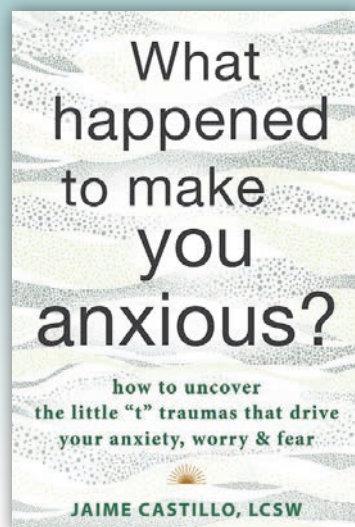
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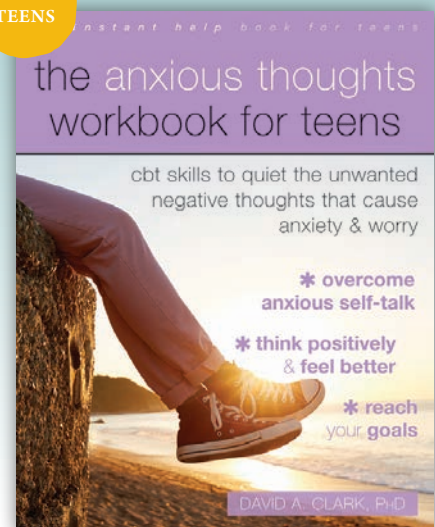


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