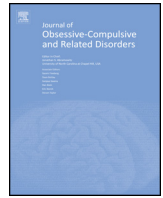




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Part 2. They scare because we care: The relationship between obsessive intrusive thoughts and appraisals and control strategies across 15 cities[☆]



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ABSTRACT

Cognitive models of Obsessive Compulsive Disorder (OCD) purport that obsessions are normal intrusive thoughts that are misappraised as significant, leading to negative emotional responses and maladaptive attempts to control the thoughts and related emotions. This paper utilised a large multi-national dataset of interview data regarding intrusive thoughts, to investigate three questions related to the cognitive model of OCD and to its stability across cultures. First, the paper aimed to investigate the implicit yet-hitherto-untested assumption of cognitive models that misappraisals and control strategies for intrusive thoughts relate similarly across cultures. Second, this study aimed to build upon recent studies categorising intrusive thoughts into repugnant and non-repugnant categories, by investigating whether

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The group as a whole was Chaired by Author Clark and Co-Chaired by Author Radomsky. Authors Radomsky, Abramowitz, Belloch, Bouvard, Clark, Coles, Doron, Moulding, Shams, Sica, Simos, and Wong designed the study and the protocol. All authors tested participants. Author Alcolado conducted preliminary data screening and author Moulding conducted the statistical analyses. Authors Moulding and Coles wrote the first draft of the manuscript with subsequent contributors listed alphabetically. All authors contributed to and have approved the manuscript. All authors have no conflicts of interest pertaining to the present manuscript.

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the content of intrusive thought moderates the relationship between the thoughts and appraisals and control strategies. Finally, this study aimed to provide further evidence regarding whether general beliefs implicated in cognitive models of OCD (e.g., responsibility, importance of thoughts) influence the occurrence of intrusions via maladaptive appraisals and control strategies. Overall, it was found that while overall intrusive thought frequency, distress, ease and importance of dismissal all varied significantly by site, their relationship with appraisals and control strategies did not. Generally, appraisals and action taken to confront the thought were the more consistent predictors, with the notably caveat that the relationship between thought frequency and appraisals was not strong. Second, repugnant vs. non-repugnant thought-content differed only with respect to thought frequency, but thought-content did not moderate the relationship between intrusive thoughts and control strategies and appraisals. Finally, appraisals and control strategies generally partially mediated the relationship between general OCD-related beliefs and the occurrence of, and distress associated with, intrusive thoughts. The results are taken to add credence to cognitive models of OCD and their validity across cultures.

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1. Introduction

It is now well accepted that the occurrence of Obsessive Compulsive Disorder (OCD) is not restricted to a specific culture or particular era (de Silva, 2006; Nedeljkovic, Moulding, Foroughi, Kyrios, & Doron, 2012). Cultural and geographically-diverse clinical and epidemiological data have shown remarkable consistency both with respect to the presence and to the characteristics of OCD symptoms (for review, see Nedeljkovic et al., 2012). Cognitive models of OCD suggest that the construction of meaning and interpretations of common intrusive phenomena play large roles in the development and maintenance of specific obsessive and compulsive symptoms (e.g., Clark, 2004). As meaning construction itself varies cross-culturally – how one perceives oneself, one's body, and one's health, along with how one defines constructs such as disorder and normality, and how one conducts social interactions (e.g., Fabrega, 1989; Marsella & Yamada, 2000; Marsella, Kaplan, & Suarez, 2002) – culture might be important both in determining the manifestation of OCD symptoms and in influencing their underlying mechanisms.

1.1. Culture and cognitive appraisal models of OCD and the interpretation of intrusions

Current cognitive appraisal models of OCD are based on findings that intrusive thoughts, images and urges – distinct, identifiable cognitive events that are unwanted, unintended, and recurrent – are experienced by the majority of the population (e.g., Rachman & de Silva, 1978; Salkovskis & Harrison, 1984; cf. Rassin & Muris, 2007). The characteristics of intrusive thoughts include that they interrupt the normal flow of thoughts, interfere in task performance, are associated with negative affect, and are difficult to control (Clark & Rhyno, 2005). It is posited that normal intrusions escalate into clinical obsessions when the intrusions are misinterpreted as important and meaningful, leading to maladaptive control attempts to confront or avoid the thought (e.g., thought suppression; compulsions), which can serve to increase the salience attributed to the thoughts or the occurrence of the thoughts themselves (e.g., Clark, 2004; Salkovskis, 1985).

Authors such as Rachman (1993, 1997, 1998) have emphasized the importance of the content of intrusive thoughts in the development of obsessions, noting that intrusions which relate to themes from the major moral systems (e.g., sex, aggression, blasphemy) are more likely to be misinterpreted as being significant, personally revealing, or threatening. Freeston and Ladouceur (1998) noted that “It is no coincidence that we typically see harming obsessions among gentle people, religious obsessions among religious people, thoughts about sexuality among highly

moral people, and thoughts about mistakes among careful people: the more important something is, the worse it seems to have a thought about it.” (p. 141; see also Aardema et al., 2013; Moulding, Aardema & O'Connor, in press). Thus, it follows that since moral concerns and other matters of emphasis (e.g., cleanliness, religion, sexuality) differ cross-culturally, the intrusive thoughts that are interpreted by individuals as being most meaningful may also differ between cultures. Indeed, even within a particular culture, specific social and environmental concerns differ over time, which are often reflected in the nature of individuals' preoccupations. For example, de Silva (2006) noted that in OCD patients in the United Kingdom, over the previous two-to-three decades, contamination fears had shifted from fears of asbestos to fears of HIV/AIDS. In sum, one's culture and personal background may influence the specific themes of obsessions or preoccupations experienced by impacting interpretations of intrusive thoughts.

A limited number of empirical studies have looked more generally at the relationship between intrusions, control strategies, and appraisals (for review, see Clark & Purdon, 1995; Clark & O'Connor, 2005). The most OCD-relevant of these have used Purdon and Clark's (1993) Obsessive Intrusive Inventory, or revisions of it, in Canadian (Purdon & Clark, 1994a, 1994b) and Spanish samples (Belloch, Morillo, Lucero, Cabedo, & Carrio, 2004; García-Soriano & Belloch, 2013). In these studies, it was consistently found that thought frequency was associated with beliefs or worries that the thought would come true, and perceptions of the uncontrollability of the thoughts (Belloch et al., 2004; Purdon & Clark, 1994a, 1994b). Further, there was also consistency in findings across studies that the unpleasantness of the thoughts was not related to thought frequency (Belloch et al., 2004; Purdon & Clark, 1994a, 1994b). The similarity in findings across the two cultures (Canadian and Spanish) lends further credence to the findings. One minor difference was observed; the finding that thought frequency and the importance of controlling the thought were significantly associated in the Spanish sample (Belloch et al., 2004), but not in either of the Canadian samples (Purdon & Clark, 1994a, 1994b). With regards to control strategies, there was some evidence that overt and covert methods of neutralizing and distracting were related to the frequency of intrusions, but only one study has shown a relationship between thought frequency and self-reassurance or telling oneself to stop (Belloch et al., 2004; Purdon & Clark, 1994b). In summary, while cross-sectional, findings of these initial studies are broadly consistent with cognitive models that implicate appraisals in determining individuals' emotional responses to stimuli, albeit providing weaker evidence for the association of control strategies in leading to an escalation of thought frequency (cf. Clark, 2004). Given the limited number of OCD-relevant studies, firm conclusions are premature.

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