



# Quarterly Newsletter

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## Allen Weg, Ed.D. Presented on "Storytelling in the Treatment of OCD"

by Rachel Strohl, Psy.D.

On Monday, June 13, 2011, Allen Weg, Ed.D., presented at the quarterly meeting of OCD New Jersey (OCD NJ). Dr. Weg is founder and director of Stress and Anxiety Services of New Jersey, a private practice of licensed psychologists in East Brunswick, all of whom specialize in the cognitive behavioral therapy of anxiety disorders. In addition to being Vice President of OCD NJ, Dr. Weg is also on the Board of Directors for the New Jersey Association of Cognitive Behavioral Psychologists, and is on the Scientific Advisory Board for the International OCD Foundation.



Dr. Weg explained to the audience that his presentation would not teach anything uniquely different about the treatment of OCD, but would share a "method of teaching" about OCD and its treatment in a different way. People can feel afraid, embarrassed, or confused about their OCD symptoms, but in fact people who have OCD are "normal people with nonsensical symptoms." The treatment for OCD can "seem even crazier than the symptoms themselves," so he uses metaphors and stories to teach about the disorder and "sell the treatment."

Dr. Weg's book, *OCD Treatment through Storytelling*, is a compilation of around fifty stories that mental health professionals can use in therapy or people with OCD can use to understand their own disorder. According to Dr. Weg, while OCD can be bizarre and strange, the disorder contains "something familiar that all people can recognize." In the story, "Student Driver," Dr. Weg defines obsessions as intrusive

## Next Quarterly Meeting - ACT and OCD

On Monday, September 12, 2011, at 7:30 PM, Dr. Cynthia Radnitz will present at our quarterly meeting. Her topic will be, "Acceptance and Commitment Therapy: A New Approach to Treating OCD." Directions may be found elsewhere in this newsletter.

Dr. Radnitz will be presenting on how a relatively new school of therapy, Acceptance and Commitment Therapy (ACT), can be used to treat OCD. First, the theoretical basis for the therapy and how its underlying assumptions differ from those of more traditional CBT will be reviewed. Dr. Radnitz will then describe ACT interventions and how they would be used to treat OCD, and will show a brief video depicting how ACT is implemented in a therapy session. Finally, a brief review of outcome data from research conducted to evaluate ACT for treating OCD will be presented."



Dr. Radnitz received her PhD and Master's degree from SUNY/Albany, and her BA from Duke University. She is a professor at Fairleigh Dickinson University Department of Psychology, and has a private practice in Rochelle Park, Bergen County, NJ. She has previously worked as a psychologist at the American Institute for Cognitive Therapy in NYC. Dr. Radnitz has had several book chapters and several dozen articles published in a variety of clinical journals and on a variety of clinical subjects, including PTSD, applications of Cognitive Behavioral therapy, and also on alcohol, pain, and subjects related to anxiety. Dr. Radnitz has also presented extensively at many conferences over the years, on subjects such as the treatment of headaches, anxiety disorders, depression, alcohol and substance abuse, spinal chord injuries and other physical disabilities, and is she is also the recipient of several research grants.

## Jeff Bell, IOCDF Spokesperson, to present at Annual Conference

On Sunday, October 23, 2011, Jeff Bell and Allen Weg, Ed.D. will present, "The Greater Good Perspective Shift - A 'Field-Tested' Approach to OCD Treatment Motivation" at our 12th Annual Conference.

In this interactive, multimedia presentation, Mr. Bell shares the groundbreaking motivation strategy he developed--out of sheer necessity during his own treatment--for consumers like himself facing the rigors of exposure/response-prevention therapy. Dr. Weg will provide the clinical analysis of the material being reviewed by Mr. Bell. As countless therapists and consumers across the country have learned through Bell's books and workshops, one simple "cognitive shift" technique can make all the difference between consumer overload and successful CBT/ERP treatment.



Jeff Bell

Their presentation will be followed by a panel of participants who will present, "Living with OCD." See page 3 for all details.

## 2012 Entertainment Books for Sale!

As OCD NJ has done in the past few years, Entertainment Books are now available for purchase. This is one of our main fundraisers for the year and a great way to save money. Please contact Ina Spero at (732) 828-0099 if you are interested in purchasing one for yourself or as a gift! The books will be available for purchase at our Annual Conference.

## PRESIDENT'S MESSAGE



Dear Friends:

Hope everyone fared well during our most recently uncomfortable heat wave and Hurricane Irene. Now we have the "mild" fall to look forward to.

In May, as President of OCD NJ, I gave a presentation on "OCD and the Family" at Easter Seals, New Jersey, located in Somerville, NJ. Easter Seals provides disability services. For more information, go to [www.eastersealsnj.org](http://www.eastersealsnj.org).

We would like to have your suggestions on which OCD and related topics you would like covered in the coming FALL/WINTER season for our quarterly meetings. Your input is indeed most important.

Kindly either see me at our upcoming quarterly meeting on September 12th with your input, or call me at 732-828-0099 from 9:00 a.m. to 9:00 p.m. daily.

Looking forward to seeing you in September.

Sincerely,  
*President Ina Spero*

## **SAVE THESE DATES FOR 2011!**

September 12, December 12

These are the OCD New Jersey meeting dates for 2011!

## **CONGRATULATIONS TO OCD NJ ART CONTEST WINNERS!**

### **In the Kids Category - Ages 5 - 12:**

**Daniel Lumsden - age 11**

### **In the Teens Category - Ages 13 - 18**

**Michael N. Levine - age 14**

His piece is titled "Growing Again"

Thank you to everyone who participated in the contest. Each of the above winners will receive a \$25 gift card.

Notecards with the artwork of the artists named above will be available for purchase at our annual conference in October. Watch the website purchasing details as well in October.

## **NATIONAL OCD FOUNDATION CONTACTS**

International OCD Foundation Phone: (617) 973-5801  
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Boston, MA 02196  
E-mail: [info@ocfoundation.org](mailto:info@ocfoundation.org)  
Internet: [www.ocfoundation.org](http://www.ocfoundation.org)

## **Any Comments?????**

The staff of the Newsletter encourages all comments on our published articles. Also, any letters and articles, which you wish to submit for our quarterly publications, are welcome. Please submit them to, Ina Spero, OCD New Jersey, 60 MacAfee Road, Somerset, NJ 08873.

**The OCD New Jersey telephone hours are 9:00 a.m. to 9:00 p.m. - Feel free to call (732) 828-0099**

## **Disclaimer**

The information presented in this Newsletter should not be taken in lieu of proper medical and/or mental health professional services. The Board of Directors of OCD New Jersey, as well as all other volunteers involved in the development and distribution of this Newsletter, do not endorse any particular viewpoint or information presented here, and are not liable for any damages resulting from any misrepresentations made by the readership of this newsletter or treatment by any organization member, newsletter advertiser, or article author.

## **OCD New Jersey MISSION**

The Affiliate is a community of those who have an interest in Obsessive Compulsive Disorder and whose goals are:

- To educate the public and professional communities about the disorder.
- To support individuals afflicted and their significant others.
- To support research into the causes and treatments of this disorder.

## **OCD New Jersey OFFICERS**

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**OCD New Jersey - An Affiliate of the International OCD Foundation  
presents our 12th Annual Conference...**

**“The Greater Good Perspective Shift -  
A ‘Field-Tested’ Approach to OCD Treatment Motivation”  
An Interactive Multimedia Presentation  
by Jeff Bell and Allen Weg, Ed.D.**

**plus “Living with OCD” Panel**

**Sunday, October 23, 2011 • 10 AM TO 3 PM • Doubletree Hotel Somerset, NJ**

**PROGRAM**

This program is designed for both professionals and non-professionals. During a full brunch Dr. Weg and Mr. Bell will present, “The Greater Good Perspective Shift-A ‘Field-Tested’ Approach to OCD Treatment Motivation.” In this interactive, multimedia presentation, Mr. Bell shares the groundbreaking motivation strategy he developed--out of sheer necessity during his own treatment--for consumers like himself facing the rigors of exposure/response-prevention therapy. At the same time, Dr. Weg will provide the clinical analysis of the material being reviewed by Mr. Bell. As countless therapists and consumers across the country have learned through Bell's books and workshops, one simple "cognitive shift" technique can make all the difference between consumer overload and successful CBT/ERP treatment.

The second part of the program, entitled, “Living with OCD,” will consist of a panel of those affected by OCD, who will each briefly speak about their experiences and then take questions from the audience attendees. This will be moderated by Dr. Weg.

**OUR PRESENTERS**

Jeff Bell is the news anchor/reporter for KCBS Radio (CBS/San Francisco) and national spokesperson, member of the Speaker's Bureau and member on the board of directors for the International OCD Foundation. He has authored, “When in Doubt, Make Belief: An OCD-Inspired Approach to Living with Uncertainty (New World Library, 2009) and, “Rewind, Replay, Repeat: A Memoir of Obsessive-Compulsive Disorder (Hazelden, 2007). He is the recipient of the 2007 National Edward R. Murrow Award / Radio-Television News Directors Association and the 2007 National Forwards Award / Mental Health America.

Allen H. Weg, Ed.D. is one of the co-founders and Vice President on the Board of Directors of OCD NJ. He is author of “OCD Treatment Through Storytelling: A Strategy for Successful Therapy,” (Oxford University Press, 2010) and is on the Scientific Advisory Board of the International OCD Foundation. He is also Founder and Director of Stress & Anxiety Services of NJ, a clinical practice in East Brunswick specializing in the treatment of OCD.

*CEU Credits for Social Workers pending approval of NJ State Board of Social Work Examiners, CE credits for psychologists pending approval from NJPA, and CEH Credits for Educators, NJ Department of Education.*

**SCHEDULE**

10:00 - 10:30	Registration, Brunch opens
10:30 - 10:45	Welcoming Remarks, Ina Spero, OCD President
10:45 - 1:45	Mr. Bell's and Dr. Weg's Presentation (includes break times)
1:45-2:55	“Living with OCD” Panel, Dr. Allen H. Weg, Moderator
2:55- 3:00	Closing Remarks - Ina Spero

**REGISTRATION FORM**

Advance Registration (before 10/15/11) - \$85  
Late/On-Site Registration - \$95  
CEU Credits - Advance Registration - \$95  
CEU Credits - Late/On-Site Registration - \$105  
Student Fee (full-time with proper I.D.) - \$50  
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No confirmation of registration will be sent

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# RAY OF HOPE

by Ray St. John

My name is Ray St. John, and I am one of many teenagers who have had to deal with OCD for much of his life. I am fortunate, though, because OCD no longer has control of my life and my future. Step by step, I got control of my OCD using several strategies including medication and exposure and response prevention therapy (ERP). However, my final push towards freedom came when I chronicled my struggles and triumphs in a book – “The Ray of Hope: A Teenager’s Fight Against Obsessive Compulsive Disorder.” Fighting against OCD defined who I am today and looking back on those fights enabled me to remember the mistakes I made and the strategies I used to conquer OCD. In a way, I wrote my book to help me remember where I had been and what strategies I used to get over my OCD. Even though my OCD symptoms are presently negligible, I know that it can return and that I might need to reuse those strategies. However, I also wrote my story because I hope to help other teenagers who are struggling with similar OCD problems.

My obsessions consist primarily of a sexual nature and became particularly bad around age 14. At one time, these obsessions upset my daily activities to the point that I rarely accomplished anything or felt good. My mind had become immobile; trapped behind the wall of OCD. I could not enjoy life because my OCD told me that perhaps, I had committed or would commit some horrendous action. For example, I would see a child and think to myself, “Did I just have an unconscious sexual attraction to that 5 year old?” Guilt would creep over my mind and I would wonder, “Am I a terrible person?”

My journey to defeat OCD began with a prescription for an antidepressant and with visits to a psychologist. The psychologist I saw did the best he could to help me, but my reluctance to discuss the sexual nature of my thoughts prevented him from sufficiently helping me. I remember recounting some of my sexual thoughts to him by disguising those thoughts as something else so as to avoid the taboo subject that my thoughts revolved around. Obviously, this approach didn’t help me much, and I continued to suffer from my sexual obsessions.

My mother and I weren’t sure what to do next. She had read about ERP therapy and had become convinced that this was the therapy we needed to do. But, how were we to accomplish this? We had already been to one therapist who didn’t know anything about ERP therapy. How were we to find someone to help us do this? Or, could we do this on our own? My mother, a pediatrician, was never one to shy away from a difficult task, so she decided to try ERP therapy with me.

Even though we knew that ERP was the way to go, I fought it for a while. My main struggle with overcoming OCD was to gain the mindset needed to overcome any mental disorder; you have to want to get better. This key was far out of my grasp because I falsely relied on OCD as a meter of my morality. In other words, I needed to do my compulsions (hand washing because I felt “dirty” or seeking reassurance from others because I didn’t believe that I was a good person) to assure myself that I was a moral person and hadn’t hurt someone. I desperately needed something to help me approach the ERP therapy. What we finally decided to use

may seem counterintuitive to many, but it turned out to be highly effective: My mother paid me to do ERP therapy. In her opinion, doing ERP therapy is hard work and should be rewarded. With the monetary incentive in place, we started out. Even though I wasn’t totally convinced that ERP would work, I was willing to try. I liked the idea of being paid, and I think a part of me also dared hope that it would work. Imagine my surprise when I realized that I was getting better shortly after starting ERP therapy. In fact, the harder I worked at the therapy, the faster my symptoms disappeared. Several times I have been asked how I got through doing ERP therapy with my mother, especially since my obsessions are of a sexual nature. Even though my mother is a physician and was used to dealing with personal matters with her patients, I still found it difficult to talk with her regarding my sexual obsessions. To deal with this predicament, we invented an enlightened “being” that took the form of one of our cats named Hank. When I became too anxiety ridden, I would take Hank into my arms and hold him close. I was comforted by his presence and his peaceful disposition. My mother, ingeniously, began personifying him and he, instead of my mom, would assume the role of my therapist. Many times Hank pulled me through the difficult steps of doing the ERP therapy. He would sit steadily by while I looked at pictures that triggered my worst obsessions, read excerpts from books that caused me tremendous anxiety, or wrote and recorded scenarios that were designed to bring forth my worst fears. Even today, I still think of Hank when the stress and anxiety of daily life pile up on me.

Today, my OCD symptoms are barely present. From time to time, it tries to take over but I know how to deal with it. I use the skills I learned during ERP therapy to quickly quell those thoughts and go on. Because I learned how to fight back my OCD, my life is now good. I no longer take any medication for my OCD, and I spend very little time or energy dealing with it. I have just graduated from high school and will attend college in the fall where I plan to study for a career in medicine. I know that I was lucky to have the help I did, and I realize that many others are still struggling. I wish I could help them all because I know the devastation that OCD can cause. Perhaps, what I have written in my book can provide some solace and hope to my fellow sufferers.

Despite the hours of anxiety, guilt, and torment I felt due to OCD, I am grateful for the experience it provided. Without OCD, I would not be the person I am today. I would feel differently, think differently, and be a completely different person. Due to the nature of the therapies required to overcome OCD, I learned a lot about myself and what I truly want. I have become more empathetic of others who are suffering around me. The wisdom and strength that I gained from fighting back my OCD will serve me well for the rest of my life. Even though I would never wish OCD on anyone, and I considered it one of the worst things that has happened to me, I have to admit one thing: OCD defined who I am.

*Ray St John is author of, “The Ray of Hope: A Teenager’s Fight Against Obsessive Compulsive Disorder.”*

## **Professional Directory (continued on pages 6 & 7)**

The professionals included in this Directory have expressed an interest in treating individuals with OCD. This Affiliate has not investigated these individuals, nor does it have the facilities to evaluate their competence in treating OCD. This Affiliate does not recommend or endorse the competence or expertise of anyone listed. This Directory of treatment providers is not an endorsement, but merely a source of individuals who have indicated that they treat OCD. **If you are interested in advertising in our Professional Directory, please contact Ina Spero at (732) 828-0099 from 9 a.m. to 9 p.m.**

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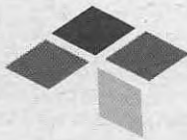
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# “Machine Man” Gives OCD A Voice Through Mainstream Media and Art

*This article was originally published in the IOCDF Newsletter*

Two years ago, a very close friend of mine confessed to having OCD. Like most people, I thought I had at least a general understanding of Obsessive Compulsive Disorder. I was wrong.

It turned out that what I knew about it was built on the usual stereotypes that center around the ‘obsessive’ part of OCD. Some of us obsess about TV shows, our mothers obsess about cleaning, our friends obsess over ex boyfriends and girlfriends. The acronym has morphed into an adjective and I sometimes hear my peers saying things like “I’m OCD about being on time” or “Have you seen her closet? She’s so OCD.” But after hearing about how much my friend has suffered and how drastically the disorder impacts his life, I realized that a greater piece of the OCD story was still missing to me.

So, I set out to learn the truth about OCD. The real version.

The more I researched, the more I realized how ignorant I truly was. There were aspects of the disorder that I had absolutely no idea people were struggling with. And I logically concluded that, if I didn’t know about these things, there must be millions of other people who don’t know.

As a filmmaker, I felt compelled to do something about it. And the best way I know how to bring the truth about OCD to light is through the powerful medium of film.

Why is it crucial to give a voice to OCD through film? Because in this modern age, OCD is still considered to be a closeted disorder and that’s unacceptable.

We’ve witnessed an amazing transformation for ‘mental health’ in the great American discourse of our time. Just a generation ago it was a hush-hush topic with words like “depression” and “anxiety” reserved solely for the medical realm. Today, Zolof and Prozac have become readily recognized names and accounts of mental illness quickly climb the bestseller list. Undoubtedly, mental health and its associated terms have become part of our every-day language.

Yes, we have the words for it now. We also have the TV shows, the magazines, the songs, the celebrities, the books, and the websites. The OCD community has benefited tremendously from this sudden surge in mental health awareness and it’s almost as if OCD is simply out in the open.

Almost, but not quite

The fact is, OCD patients have not enjoyed the public embrace that depressed or even bipolar communities have in recent years. Somehow, amidst a decade of self-empowerment and social revolution, people with OCD have danced around the periphery of dinner table conversations. Why is it that people can tell friends and family about a struggle with depression, but not obsession?

And while we’re asking questions, why is it that some people have to “come out” about their OCD? Why is it that in this day of Dr. Oz and Dr. Phil, and every primetime medical drama that ever was or will be, we choose to use the words “come out” when we can say, “shared” or “opened up”?

Perhaps in the hype and excitement of our great American mental health makeover, we failed to notice that OCD, unlike the more easily digested depression or anxiety, was not given the red carpet treatment into the collective American psyche.

It can be argued that mainstream media, singlehandedly, made mental illness OK over the last 10 years. A healthy dose of Oprah coupled with a Radiohead album was enough to tell anyone in the late 90’s that hey, a lot of people suffer from mental illness, get used to it. And we did.

Some might argue it wasn’t the right time to start a civic dialogue about OCD. Others have said that the nuances of OCD are too severe and not palatable to a culture that likes to have their disorders neatly packaged into a 30 second Pfizer commercial.

I, however, think that OCD was simply never given a mainstream media vehicle through which the public could explore it. Mainstream media, as misleading as it can be, can also be a potent tool for enlightenment of the masses.

Indeed, it wasn’t until “Rain Man” and “Children of a Lesser God” that the autistic and hearing impaired communities were given a voice. Before that, films like “One Flew Over the Cuckoo’s Nest,” albeit a dramatized depiction, gave audiences a peek into mental health facilities.

Now, it’s time to give OCD a voice. It’s time to tell the real story in a way that gives full attention and full authenticity to the disorder. Film allows you to affect people’s emotions, encourage people to see things differently, educate and evoke newfound empathy for others - all while entertaining them.

So, I embarked on the journey of writing “Machine Man,” a screenplay about a man suffering with OCD. The story received a great deal of input and support from leaders in the field of OCD, including expert and radio news anchor, Jeff Bell, author of *Rewind, Replay, Repeat*.

“One of the things I found most impressive about “Machine Man” was how it was able to provide context for the compulsions that are visible to an audience. What’s so often missing in a depiction is what is prompting those compulsions, what is going on inside the head ... and one of the things that I so appreciate about the script for “Machine Man” is that it ultimately leaves the audience with a sense of hope,” says Bell.

Along the way, the project and its cause have gained a small following, which has now blossomed into a fully interactive community at [www.MachineManTheMovie.com](http://www.MachineManTheMovie.com). It was all confirmation that getting OCD in the public eye was long overdue.

This is the right time for OCD to enter the public dialogue. It’s time we let people hear the authentic voice of OCD and effectively take this condition out of the closet – strip away the shame and the embarrassment.

I realize it’s a great undertaking, but I’m not alone in my efforts. The community that has formed around “Machine Man,” or Team Machine as the effort has been affectionately named, has been incredibly supportive and interactive. It was

**“Machine Man”**  
*continued from page 8*

by way of the community’s open arms that “Machine Man” turned into not only just a film waiting to happen, but a grassroots, multi-media movement. A movement aimed at the one goal of giving a voice to those that have been silent for too long.

Which is exactly why I thought it was vital to have the characters in “Machine Man” actually say the words “Obsessive Compulsive Disorder.” In so many films of our generation, we have been made aware of the mechanics and emotions of mental illness, but filmmakers are still apprehensive to actually name the disorders they depict.

A strange phenomenon, it reflects our society’s eagerness to accept mental illness but its persistence in keeping mental health confined to its appropriate corner. It’s my feeling that this is not just the right time for a major film about OCD – it’s the right time for a major film that dares to name the illness out loud.

I know from personal experience that audiences respond to honest stories. And that’s exactly what I intend to do- tell the real story about what it’s like to suffer from OCD- just the raw truth, minus the shame and secrecy. These people deserve to have a voice and I feel privileged to be someone who wants to give them that.

If things go well, this may actually turn into OCD’s coming out party. Or should I rephrase that- let’s make “Machine Man” OCD’s red carpet appearance.

*This article was originally published in the IOCDF Newsletter  
It is being reprinted by permission, see [www.ocfoundation.org](http://www.ocfoundation.org)*

**Allen Weg, Ed.D.**  
*continued from page 1*

thoughts. The student driver thinks, “ If I move the wheel too quickly, everyone in the car can die.” This demonstrates that everyone has “weird thoughts,” but people with OCD get “stuck in the thought.” In the story, “Locked Out,” rituals are illustrated through a story about getting locked out of a car and developing the habit of squeezing the keys as one is about to close the car door, in order to make sure one remembers them in the future. This highlights that everyone does rituals at times, but rituals done by people without OCD can be functional and brief.

Dr. Weg explained that the stories help to normalize the experience of OCD, and share the message, “I get your experience.” He continued by presenting stories about the specific treatment of choice for OCD, exposure therapy. “The Bee Trap” story demonstrates that rituals keep you trapped in the OCD and anxiety leads you to do what “feels safe,” but exposure encourages the opposite: “do what feels scary, and fly into the darkness of the bee trap” to be free of anxiety and OCD. “The Horror Movie” story highlights flying into the “wrong direction over and over again,” which leads to habituation, or getting used to it. “The Swimming Pool” story explains doing exposure “one step at a time” and “at your own pace,” like walking into a cold pool slowly.

Dr. Weg entertained and delighted the audience of OCD NJ with synopses of many other stories that appear in his book. He concluded by encouraging others to use his stories as prototypes to develop their own stories and metaphors “for the purpose of better communicating your understanding of the experience and treatment of OCD.”

*Dr. Rachel Strohl is a licensed psychologist at Stress and Anxiety Services of NJ in East Brunswick. She is on the Board of Directors at OCD NJ. She may be reached at 732-390-6694.*



**Child/Adolescent OCD, Tic, Trich, & Anxiety Group  
(COTTAGE) at the University of Pennsylvania**

**Pediatric OCD Treatment Study:**

Does your little child have to have things "just right?" Does he have to do something over and over again? Does she have intrusive thoughts? Our center is looking for kids ages 5-8 with OCD to participate in a research study at the University of Pennsylvania. Those eligible receive a full assessment of symptoms and 12 weeks of behavioral therapy at no cost. Call Aubrey Edson at 215-746-3327 if interested.

**Pediatric Trichotillomania Treatment Study:**

Does your adolescent or teen pull their hair? If so, it may be Trichotillomania. Our group is conducting a research study to assess different treatments for children and teens between 10-17 years old with Trichotillomania. Those eligible receive a full assessment of symptoms and 16 weeks of behavioral therapy at no cost. Call Michelle Wilson at 215-746-3327 if interested.

**Understanding Obsessive Compulsive  
Personality Features**

*Principal Investigator: Anthony Pinto, Ph.D.*

- Is perfectionism causing problems for you?
- Do others complain about your rigidity?
- Do you worry too much about order and details?
- Do you find it difficult to relax and enjoy free time?
- Are you constantly trying to control things?
- Do you plan out every minute of your day?

Researchers at Columbia University Medical Center/NYSPI in Manhattan are seeking participants (age 18-60) in the NY metro area with several of these features. Participants will receive a confidential evaluation at no cost and payment upon completion of an interview, questionnaires, and computer tasks.

**For more information about the study, contact  
Jordan at #212-543-5938.**

To learn more about our research center, visit  
[www.columbia-ocd.org](http://www.columbia-ocd.org)

## HOW START A SUPPORT GROUP

If you look at the back of this Newsletter, you will see that there is only a small handful of support groups for OCD around the state. It is one of the goals of OCD New Jersey to help create more of these groups. If you are interested in having a group in your area, we can help. Here's how:

1) If you want to have a group, you need to find a place to meet such as at local churches, synagogues, libraries, and high schools, are good places to find free rooms. If you say you will be working with OCD New Jersey, it might also give you some "clout."

2) Determine the day and time- which may be determined by room space availability and once a month is a good place to start. An hour and 15 minutes or an hour and a half is usually the length.

3) Contact us. Call Ina Spero at 732-828-0099 (9 a.m. - 9 p.m.). We can put your name and contact number on our website and in our Newsletter. We will announce the formation of your group at our quarterly meetings. Decide if the group is only for adults, only for sufferers, or open to every body-we recommend the latter- friends, family, and children with OCD.

4) Once you have a few people- 5 is enough to get started, let us know. We will give you some guidelines about how to run the group, provide you with handouts that you can give to members of the group, and answer questions that you may have regarding the mechanics of how to facilitate group discussion. **WE ARE HERE TO HELP!**

5) If you have any questions of a clinical nature regarding running or forming a group, you can phone Dr. Allen Weg at 732-390-6694.

### **PARENT SUPPORT GROUP IN WEST WINDSOR**

A Parent Support Group has been started in West Windsor. The group meets the first Tuesday of each month at the West Windsor Library from 12:00 to 1:30 p.m. For more information, please contact Carey Bloom at 609-275-5487.

### **NEW TRICHOTILLOMANIA GROUP FORMING IN MERCER CTY/CENTRAL NJ**

Looking for women of all ages to participate in a self-led support group. I recently moved from the Boston area, where I was in a support group for fifteen years. The group was immeasurably helpful to me on many levels, and gave all members the rare and wonderful opportunity to help each other live with this challenging disorder. I can't overestimate the benefits of peer support and the freedom to discuss personal issues with women who share them. Please contact me at [mercertrich@yahoo.com](mailto:mercertrich@yahoo.com).

### **PARENT SUPPORT GROUP IN RANDOLPH**

A new support group for the parent's of adolescents is forming in Randolph. For more information, please call Terry or Claire at (973) 366-3564

## FIND A GROUP FOR YOU!

### **BDD GROUP IN ROSELLE PARK**

A support group for body dysmorphic disorder (BDD) is in the Roselle Park area. If you are interested in participating in this group, please call Bob at home at (908) 298-1777 or on his cell at (908) 247-8282.

### **GROUP IN HOWELL**

A support group is in the process of being formed in Howell. It will be held every Wednesday from 8:15 to 9:45 p.m. at Southard Grange #218, 4860 Hwy 9 South, Howell. For questions, call Ron L. at (848) 702-5044.

### **S. JERSEY/PHILADELPHIA TRICHOTILLOMANIA**

The South Jersey/Philadelphia Trichotillomania support group is a free meeting for children, adolescents, and adults living with trichotillomania. Family members are also welcome. This therapist-assisted group is led by members of the Trichotillomania community. This is not a therapy group, but a venue to share experiences and connect with others. Dr. Deibler will be present at meetings as a facilitator and to answer questions. If you are interested in learning more about the group, please contact Dr. Deibler at (856) 220-9672. Meetings are held on the first Saturday of each month from 10:00 to 11:00 a.m. in Cherry Hill.

### **NEW GROUP IN EAST BRUNSWICK**

A new group will meet at the East Brunswick Library on Civic Drive (off Ryders Lane). Please call Adrienne at (908) 672-1927 or e-mail [listeningears123@aol.com](mailto:listeningears123@aol.com). The group plans to meet the third Thursday of every month at the East Brunswick Library.

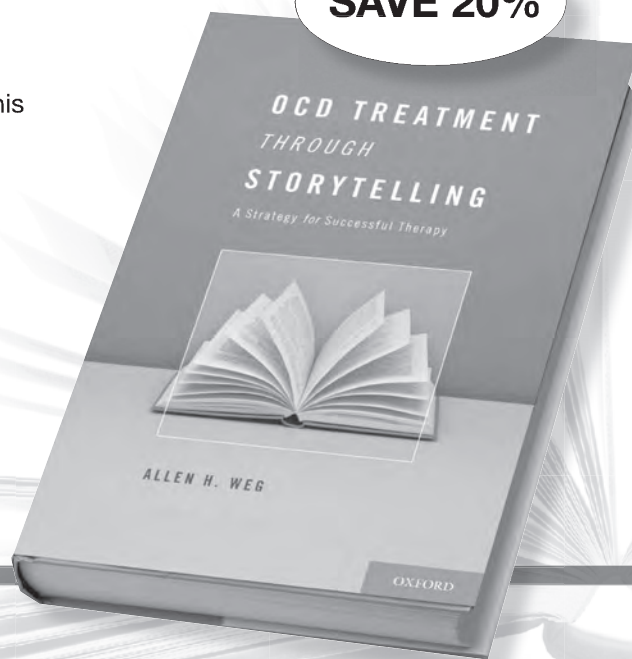
### **NEW TEEN GROUP IN ROBBINSVILLE**

Teen Support Group in Mercer County will meet at the Robbinsville Branch of the Mercer County Library. This group is for teens and young adults and their parents. If you are interested in learning more about the group and when it will meet, please call Mike Bellerio at (609) 259-2004 or e-mail [ocdteenmercer@verizon.net](mailto:ocdteenmercer@verizon.net).

“ Dr. Weg has produced a **masterpiece** that shows clinicians innovative ways to teach patients and their family members about the complexities of OCD. I **highly recommend** this book. It is entertaining and teaches a very useful way of communicating the difficult and often very frightening aspects of OCD symptoms and treatment. ”

— **Michael Jenike, M.D.**, Professor of Psychiatry and Founder of the OCD Clinical and Research program, Harvard Medical School and Founder of the OCD Institute, McLean Hospital

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## DIRECTIONS TO OUR MEETING

Our next quarterly meeting, which will take place on **Monday evening, September 12, 2011 at 7:30 p.m** at **Robert Wood Johnson University Hospital, New Brunswick, NJ, in the Medical Education Building, Room 108A.**

**From the New Jersey Turnpike:**

Take Exit #9 (New Brunswick) and proceed on Route 18 North, approximately 2 miles to the exit Route 27 South (Princeton Exit). Follow Route 27 South (Albany Street) to the 4th light (New Brunswick train station on left). Make a right onto Easton Avenue. Proceed one block and make a left at the next light onto Somerset Street. Proceed one block to the first light and make a left onto Little Albany Street. The hospital is on the right side and the NJ Cancer Institute is on the left side. Pass the Emergency Room entrance and the hospital's Parking Deck on your right hand side. (Parking Deck fee: \$1 per hour). To get to the meeting, in Room 108A, follow the directions under Medical Education Building.

**From Southern New Jersey:**

Take Route 18 North to Route 27 South (Princeton exit). Follow Route 27 South (Albany Street) for 4 lights (New Brunswick train station on left). Make a right onto Easton Avenue. Proceed one block and make a left at the next light onto Somerset Street. Proceed one block to the first light and make a left onto Little Albany Street. The hospital is on the right side and the NJ Cancer Institute is on the left side. Pass the Emergency Room entrance and the hospital's Parking Deck on your right hand side. (Parking Deck fee: \$1 per hour). To get to the meeting, in Room 108A, follow the directions under Medical Education Building.

**From Route 1 (North or South):**

Take Route 18 North to Route 27 South (Princeton Exit). Follow

the Route 27 South (Albany Street) directions above. To get to the meeting, in Room 108A, follow the directions under Medical Education Building.

**From Route 287:**

Take Exit #10 (formerly Exit #6) "Route 527/Easton Ave./New Brunswick" and continue on Easton Avenue for approximately 6 miles. Make a right onto Somerset Street. The hospital is on the right side and the NJ Cancer Institute is on the left side. Pass the Emergency Room entrance and the hospital's Parking Deck on your right hand side. To get to the meeting, in Room 108A, follow the directions under Medical Education Building.

**From the Garden State Parkway:**

Exit Route 1 South. Proceed approximately 9 miles to Route 18 North. Take Route 18 North to Route 27 South (Princeton Exit). Follow Route 27 South (Albany Street) to the 4th light (New Brunswick train station on left). Make a right onto Easton Avenue. Proceed one block and make a left at the next light onto Somerset Street. Proceed one block to the first light and make a left onto Little Albany Street. The hospital is on the right side and the NJ Cancer Institute is on the left side. Pass the Emergency Room entrance and the hospital's Parking Deck on your right hand side. To get to the meeting, in Room 108A, follow the directions under Medical Education Building.

**Medical Education Building (MEB):**

Take the hospital's parking deck elevator to the first floor and upon exiting make a right. Walk across the Arline & Henry Schwartzman Courtyard to the double glass doors; the sign above will read "Medical Education Building". For Room #108-A, make an immediate right and the room is on your left-hand side.

