

Dimensional Obsessive-Compulsive Scale

This questionnaire asks you about 4 different types of concerns that you might or might not experience. For each type there is a description of the kinds of thoughts (sometimes called *obsessions*) and behaviors (sometimes called *rituals* or *compulsions*) that are typical of that particular concern, followed by 5 questions about your experiences with these thoughts and behaviors. Please read each description carefully and answer the questions for each category based on your experiences in the last month.

Category 1: Concerns about Germs and Contamination

Examples...

- Thoughts or feelings that you are contaminated because you came into contact with (or were nearby) a certain object or person.
- The feeling of being contaminated because you were in a certain place (such as a bathroom).
- Thoughts about germs, sickness, or the possibility of spreading contamination.
- Washing your hands, using hand sanitizer gels, showering, changing your clothes, or cleaning objects because of concerns about contamination.
- Following a certain routine (e.g., in the bathroom, getting dressed) because of contamination
- Avoiding certain people, objects, or places because of contamination.

The next questions ask about your experiences with thoughts and behaviors related to contamination over the last month. Keep in mind that your experiences might be different than the examples listed above. Please circle the number next to your answer:

1. About how much time have you spent each day thinking about contamination and engaging in washing or cleaning behaviors because of contamination?
 - 0 None at all
 - 1 Less than 1 hour each day
 - 2 Between 1 and 3 hours each day
 - 3 Between 3 and 8 hours each day
 - 4 8 hours or more each day

2. To what extent have you avoided situations in order to prevent concerns with contamination or having to spend time washing, cleaning, or showering?
 - 0 None at all
 - 1 A little avoidance
 - 2 A moderate amount of avoidance
 - 3 A great deal of avoidance
 - 4 Extreme avoidance of nearly all things

3. If you had thoughts about contamination but could not wash, clean, or shower (or otherwise remove the contamination), how distressed or anxious did you become?
 - 0 Not at all distressed/anxious
 - 1 Mildly distressed/anxious
 - 2 Moderately distressed/anxious
 - 3 Severely distressed/anxious
 - 4 Extremely distressed/anxious

4. To what extent has your daily routine (work, school, self-care, social life) been disrupted by contamination concerns and excessive washing, showering, cleaning, or avoidance behaviors?
 - 0 No disruption at all.
 - 1 A little disruption, but I mostly function well.
 - 2 Many things are disrupted, but I can still manage.
 - 3 My life is disrupted in many ways and I have trouble managing.
 - 4 My life is completely disrupted and I cannot function at all.

5. How difficult is it for you to disregard thoughts about contamination and refrain from behaviors such as washing, showering, cleaning, and other decontamination routines when you try to do so?
 - 0 Not at all difficult
 - 1 A little difficult
 - 2 Moderately difficult
 - 3 Very difficult
 - 4 Extremely difficult

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Category 2: Concerns about being Responsible for Harm, Injury, or Bad Luck
Examples...

- A doubt that you might have made a mistake that could cause something awful or harmful to happen.
- The thought that a terrible accident, disaster, injury, or other bad luck might have occurred and you weren't careful enough to prevent it.
- The thought that you could prevent harm or bad luck by doing things in a certain way, counting to certain numbers, or by avoiding certain "bad" numbers or words.
- Thought of losing something important that you are unlikely to lose (e.g., wallet, identify theft, papers).
- Checking things such as locks, switches, your wallet, etc. more often than is necessary.
- Repeatedly asking or checking for reassurance that something bad did not (or will not) happen.
- Mentally reviewing past events to make sure you didn't do anything wrong.
- The need to follow a special routine because it will prevent harm or disasters from occurring.
- The need to count to certain numbers, or avoid certain bad numbers, due to the fear of harm.

The next questions ask about your experiences with thoughts and behaviors related to harm and disasters over the last month. Keep in mind that your experiences might be slightly different than the examples listed above. Please circle the number next to your answer:

1. About how much time have you spent each day thinking about the possibility of harm or disasters and engaging in checking or efforts to get reassurance that such things do not (or did not) occur?
 - 0 None at all
 - 1 Less than 1 hour each day
 - 2 Between 1 and 3 hours each day
 - 3 Between 3 and 8 hours each day
 - 4 8 hours or more each day
2. To what extent have you avoided situations so that you did not have to check for danger or worry about possible harm or disasters?
 - 0 None at all
 - 1 A little avoidance
 - 2 A moderate amount of avoidance
 - 3 A great deal of avoidance
 - 4 Extreme avoidance of nearly all things
3. When you think about the possibility of harm or disasters, or if you cannot check or get reassurance about these things, how distressed or anxious did you become?
 - 0 Not at all distressed/anxious
 - 1 Mildly distressed/anxious
 - 2 Moderately distressed/anxious
 - 3 Severely distressed/anxious
 - 4 Extremely distressed/anxious
4. To what extent has your daily routine (work, school, self-care, social life) been disrupted by thoughts about harm or disasters and excessive checking or asking for reassurance?
 - 0 No disruption at all.
 - 1 A little disruption, but I mostly function well.
 - 2 Many things are disrupted, but I can still manage.
 - 3 My life is disrupted in many ways and I have trouble managing.
 - 4 My life is completely disrupted and I cannot function at all.
5. How difficult is it for you to disregard thoughts about possible harm or disasters and refrain from checking or reassurance-seeking behaviors when you try to do so?
 - 0 Not at all difficult
 - 1 A little difficult
 - 2 Moderately difficult
 - 3 Very difficult
 - 4 Extremely difficult

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Category 3: Unacceptable Thoughts

Examples...

- Unpleasant thoughts about sex, immorality, or violence that come to mind against your will.
- Thoughts about doing awful, improper, or embarrassing things that you don't really want to do.
- Repeating an action or following a special routine because of a bad thought.
- Mentally performing an action or saying prayers to get rid of an unwanted or unpleasant thought.
- Avoidance of certain people, places, situations or other triggers of unwanted or unpleasant thoughts

The next questions ask about your experiences with unwanted thoughts that come to mind against your will and behaviors designed to deal with these kinds of thoughts over the last month. Keep in mind that your experiences might be slightly different than the examples listed above. Please circle the number next to your answer:

1. About how much time have you spent each day with unwanted unpleasant thoughts and with behavioral or mental actions to deal with them?
 - 0 None at all
 - 1 Less than 1 hour each day
 - 2 Between 1 and 3 hours each day
 - 3 Between 3 and 8 hours each day
 - 4 8 hours or more each day

2. To what extent have you been avoiding situations, places, objects and other reminders (e.g., numbers, people) that trigger unwanted or unpleasant thoughts?
 - 0 None at all
 - 1 A little avoidance
 - 2 A moderate amount of avoidance
 - 3 A great deal of avoidance
 - 4 Extreme avoidance of nearly all things

3. When unwanted or unpleasant thoughts come to mind against your will how distressed or anxious did you become?
 - 0 Not at all distressed/anxious
 - 1 Mildly distressed/anxious
 - 2 Moderately distressed/anxious
 - 3 Severely distressed/anxious
 - 4 Extremely distressed/anxious

4. To what extent has your daily routine (work, school, self-care, social life) been disrupted by unwanted and unpleasant thoughts and efforts to avoid or deal with such thoughts?
 - 0 No disruption at all.
 - 1 A little disruption, but I mostly function well.
 - 2 Many things are disrupted, but I can still manage.
 - 3 My life is disrupted in many ways and I have trouble managing.
 - 4 My life is completely disrupted and I cannot function at all.

5. How difficult is it for you to disregard unwanted or unpleasant thoughts and refrain from using behavioral or mental acts to deal with them when you try to do so?
 - 0 Not at all difficult
 - 1 A little difficult
 - 2 Moderately difficult
 - 3 Very difficult
 - 4 Extremely difficult

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Category 4: Concerns about Symmetry, Completeness, and the Need for Things to be “Just Right”

Examples...

- The need for symmetry, evenness, balance, or exactness.
- Feelings that something isn't “just right.”
- Repeating a routine action until it feels “just right” or “balanced.”
- Counting senseless things (e.g., ceiling tiles, words in a sentence).
- Unnecessarily arranging things in “order.”
- Having to say something over and over in the same way until it feels “just right.”

The next questions ask about your experiences with feelings that something is not “just right” and behaviors designed to achieve order, symmetry, or balance over the last month. Keep in mind that your experiences might be slightly different than the examples listed above. Please circle the number next to your answer:

1. About how much time have you spent each day with unwanted thoughts about symmetry, order, or balance and with behaviors intended to achieve symmetry, order or balance?
 - 0 None at all
 - 1 Less than 1 hour each day
 - 2 Between 1 and 3 hours each day
 - 3 Between 3 and 8 hours each day
 - 4 8 hours or more each day

2. To what extent have you been avoiding situations, places or objects associated with feelings that something is not symmetrical or “just right?”
 - 0 None at all
 - 1 A little avoidance
 - 2 A moderate amount of avoidance
 - 3 A great deal of avoidance
 - 4 Extreme avoidance of nearly all things

3. When you have the feeling of something being “not just right,” how distressed or anxious did you become?
 - 0 Not at all distressed/anxious
 - 1 Mildly distressed/anxious
 - 2 Moderately distressed/anxious
 - 3 Severely distressed/anxious
 - 4 Extremely distressed/anxious

4. To what extent has your daily routine (work, school, self-care, social life) been disrupted by the feeling of things being “not just right,” and efforts to put things in order or make them feel right?
 - 0 No disruption at all.
 - 1 A little disruption, but I mostly function well.
 - 2 Many things are disrupted, but I can still manage.
 - 3 My life is disrupted in many ways and I have trouble managing.
 - 4 My life is completely disrupted and I cannot function at all.

5. How difficult is it for you to disregard thoughts about the lack of symmetry and order, and refrain from urges to arrange things in order or repeat certain behaviors when you try to do so?
 - 0 Not at all difficult
 - 1 A little difficult
 - 2 Moderately difficult
 - 3 Very difficult
 - 4 Extremely difficult