

# Do Orthodox & Non-Orthodox Jews Appraise Symptoms of Scrupulosity as OCD?



David H. Rosmarin<sup>1</sup>, Steven Pirutinsky<sup>1</sup> & Jedidiah Siev<sup>2</sup>

<sup>1</sup>Department of Psychology, Bowling Green State University

<sup>2</sup>Massachusetts General Hospital/Harvard Medical School



## Background

Religion may influence perceptions of psychological symptoms, particularly when symptom presentation is shaped by a socio-religious context. We therefore examined whether among Jews, Orthodox affiliation was related to recognition of scrupulosity as a form of obsessive compulsive disorder (OCD) and to attitudes towards professional treatment. We hypothesized that Orthodox Jews would be more reluctant to label religious symptoms as a mental illness and less likely to recommend professional treatment for them compared to clinically equivalent non-religious OCD symptoms. By contrast, we predicted that non-Orthodox Jews would be equally likely to label religious and non-religious symptoms as a mental illness and recommend professional care.

## Participants & Procedure

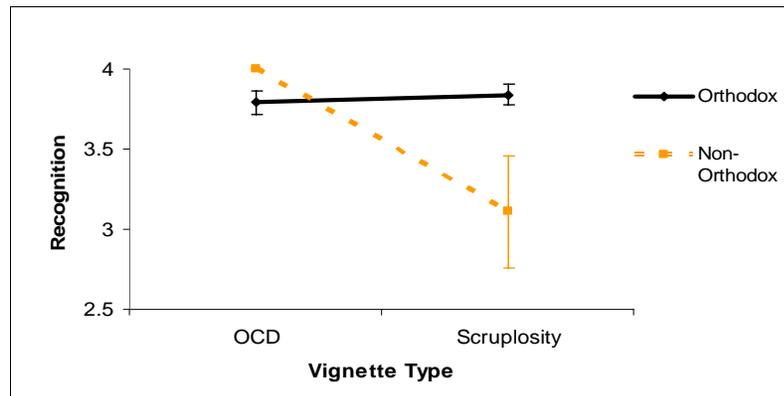
Seventy Orthodox and 23 non-Orthodox Jews, ranging in age from 19 to 71 years ( $M = 39$ ;  $SD = 14$ ), were randomized to view one of two matched vignettes (see handout) describing religious or non-religious OCD and completed a brief questionnaire.

## Measures

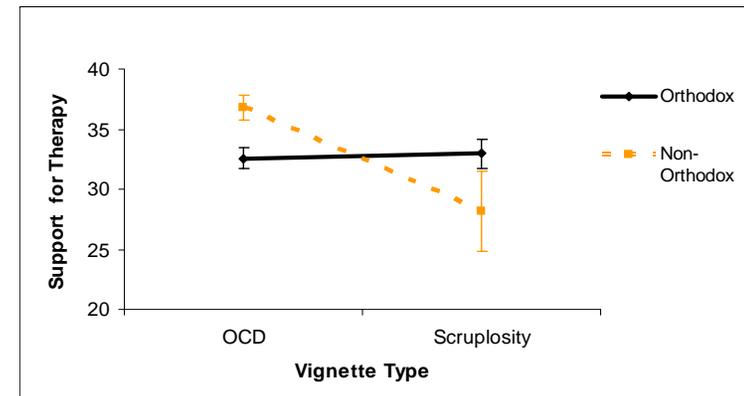
**Appraisal of OCD.** A single item, “How likely do you think it is that this individual is experiencing OCD?”, measured appraisal using a 4-point scale (“very likely” to “very unlikely”).

**Attitudes Towards Treatment.** We adapted a previously used 9-item scale by Simonds & Thorpe, 2003 (e.g., “If I were experiencing these problems, I would try to get help from a professional therapist”).

## Results



Interaction  $F(1, 89) = 15.39, p < .001, \eta^2 = .13$



Interaction,  $F(1, 89) = 8.59, p = .004, \eta^2 = .08$

Note: Points represent cell means; vertical lines depict standard error of the means.

## Discussion

Results did not support our hypotheses. Whereas Orthodox Jews were *equally* likely to recognize and recommend professional treatment for religious and non-religious symptoms of OCD, non-Orthodox Jews were *less* likely to recognize and recommend treatment for scrupulosity compared to non-religious OCD. It is possible that Orthodox Jews' familiarity with religion

serves as a necessary context for formulating appropriate judgments about scrupulosity. It is further possible that non-Orthodox Jews may be reticent to describe scrupulosity as OCD or recommend professional treatment out of fear of disrespecting bona fide religious standards.