

Introducing myself

Posted by noselfconfidence - 15 Dec 2022 18:33

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Ummm I've been looking at this forum for a while and I finally got myself to become a member of gye and post I saw Someone said that it's healthy to post so I guess I'll try

I'm in my twenties and I'm married and have kids learn half day work other half have very little self confidants I'm the middle child in a big family all my brothers and brother in laws learn all day and are big t.ch. I always felt my farther hates me even though I know it's not true now that I have my own kids but I always thought that way and I built a deep belief with me that I'm not good and my father is embarrassed of me and the only thing that made me calm and happy was to look at bad pictures in my mothers lady magazines and masturbate but today I want to stop But I just can't I watch the worst and my wife which I'm very close to thank you h for that knows abt it but I tell her it's an Old addiction that I have. She begs me to stop for my kids sake I tell her I want to stop for mine and her sake but I just can't. She tried to get me to go to therapy but I'm to embarrassed to meet someone. She recently told me to check out gye so I'm here I saw that someone wrote that new members should post so here I am. He wrote it will feel good to get it out but I actually feel bad ... I hope nobody knows me and u are probably all laughing at me for this weird first post. But I'm trying not to care and I'm really only doing this for my wife anyway she cry's in bed and I know it's because of me but just can't help it so I told her I'll try gye. Whatever

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Re: Introducing myself

Posted by Human being - 19 Dec 2022 03:58

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[cordnoy wrote on 18 Dec 2022 15:01:](#)

Welcome,

Pease go for some real help.

What you're doin' with your daughter is wrong, illegal and sick, please stay far away from her until you have recovered.

Godspeed to you

I don't know what "noselfconfidence" posted, but no matter how bad it was, I don't think such a response will help him or anyone. He probably won't try opening up to anyone ever again. Sorry for the bluntness here. And since I DO NOT know what he posted I'd love if someone can fill me in privately.

My original post had sarcasm and wasn't nice. I'm sorry if I caused you pain. It was wrong of me.

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Re: Introducing myself

Posted by Geshmak! - 19 Dec 2022 04:14

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I am so maskim! You guys should of send this to him in private message...( better said not respond like this at all)

dear nsc! I'm with you I don't thing your bad and I know that many others here have worse issues then you do and nothing wrong with that as long as there here looking for chizuk and help( like you) . Please don't stop posting I Love to read your post...

A fralichah Chanukah!!

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Re: Introducing myself

Posted by Human being - 19 Dec 2022 04:28

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Do you know what he wrote? Im curious as hell. @Cordnoy is not a dumb man. (on the contrary, looking at his "karma" it seems he's pretty darn smart.) Im so curious.

?I think its time for me to work on my curiosity.

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Re: Introducing myself  
Posted by Geshmak! - 19 Dec 2022 04:35

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Re: Introducing myself  
Posted by Human being - 19 Dec 2022 04:36

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Re: Introducing myself

Posted by Human being - 19 Dec 2022 04:38

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I dont know what he posted but looking into the article below might be helpful for some of us.

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Re: Introducing myself

Posted by Human being - 19 Dec 2022 04:43

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**Interesting article to read. Here it for whoever wants to read it.**

**You can find it here too, from the "International OCD Foundation"**

**Warning: Spoiler!**

## Am I a Monster? An Overview of Common Features, Typical Course, Shame and Treatment of Pedophilia OCD (pOCD)

**by Jordan Levy, PhD**

*Dr. Jordan Levy is a licensed clinical psychologist in private practice in Manhattan and in Livingston, New Jersey. He specializes in the treatment of Anxiety and Obsessive-Compulsive Disorder including violent and sexual obsessions.*

*This article was initially published in the Winter 2016 edition of [the OCD Newsletter](#).*

Imagine one day that you are walking past an elementary school playground. You glance over at the children and, out of the blue, a thought enters your head: “Did I just look at those kids in a creepy way?” Your brain immediately begins to doubt and analyze whether your glance was creepy and you are flooded with terror: “Why would I be staring at kids?” “Do other people do this?” “Was I physically attracted to one of them?” “Is there something wrong with me?” “Did I do something inappropriate?” “Did I get aroused by the children?” “Am I a pedophile?” “Am I going to become a pedophile?” “What does this mean that I am even thinking these thoughts?”

Continue to imagine that you find yourself yet again walking by the school playground. You will now be acutely aware and on guard for whether there were any intrusive thoughts present. You find yourself avoiding eye contact with everyone. You check where your hands are to make sure that you won’t accidentally touch a child inappropriately and you are on guard and panicked that you will experience more intrusive thoughts that suggest feelings for children. You may even check your genitals for signs of arousal. You worry others are looking at you and you may even begin to question what you have done. You feel your only option is to escape in order to protect the innocence of these children. You may feel that you are a monster and a bad person for having these thoughts in your brain. What you may not realize is that you may be suffering from a very common form of obsessive compulsive disorder (OCD). And you are not alone.

Experiencing taboo thoughts like these is one of the most common, yet lesser known, manifestations of OCD. Fortunately, recent mainstream media attention, and a new website called [www.intrusivethoughts.org](http://www.intrusivethoughts.org), are helping raise awareness of the disorder and the different forms it comes in. Many people with intrusive and taboo thoughts, such as being preoccupied about being a pedophile, have minimal or no observable compulsions. Instead, the compulsive behavior is internal. Only the person suffering can see it. This is also sometimes referred to as “Purely Obsessional OCD” or “Pure-O” because we used to consider anything experienced on the inside of a person as an obsession and anything external as a compulsion. However, now we recognize that what separates an obsession from a compulsion is that obsessions trigger anxiety and are uncontrollable. Compulsions are controllable and are aimed at trying to reduce anxiety. So, even for someone whose obsessions only manifest as intrusive thoughts, a great

deal of effort is still spent repeatedly checking, neutralizing, ruminating about, attempting to pray away, and avoiding certain thoughts — these mental actions *are* the compulsions.

For individuals with OCD, an endless amount of time is spent attempting to answer the unanswerable questions that the OCD posits. OCD is masterful at deceiving the sufferer by saying “if you just spend a little time on this question, you will figure it out and feel so much better!” Because the threat feels so real, it is extremely difficult to resist the siren’s call to engage in mental compulsions. The most imperative item on the agenda becomes gaining certainty. Often times, sufferers will replay past scenarios in their minds, making sure to examine every single “fact” that was present.

Within this subtype of “taboo thoughts” OCD, several themes tend to co-occur including fears related to pedophilia (pOCD), sexuality (hOCD), incest, bestiality, and the primary romantic relationship (rOCD). This article concentrates on pedophilia OCD (pOCD). An individual living with pOCD can be simultaneously flooded with unwanted thoughts or images related to any and all of these themes. Patients have remarked, “If I am attracted to a child of the same sex then doesn’t that mean I’m gay and shouldn’t be married?” If left unchecked, pOCD can bleed into numerous areas in one’s life.

In contrast, the DSM-V defines pedophilia as “recurrent, intense sexually arousing fantasies, sexual urges, or behaviors involving sexual activity with a prepubescent child or children” (APA, 2013). The diagnosis of pedophilia has absolutely nothing to do with the diagnosis of pOCD. Despite this clear distinction, your pOCD will undoubtedly be persuading you that you belong in the true pedophile category rather than the pOCD category, and that your therapist doesn’t really understand or your therapist is wrong. An individual living with pOCD is no more likely to be a pedophile than an individual who does not have pOCD. This is a disorder of anxiety and uncertainty, not sexual urges and behaviors. In regards to pOCD, the primitive worry-brain has randomly selected this theme as the topic that feels like it must be resolved immediately.

An individual suffering with pOCD will experience intrusive thoughts or images (spikes) accompanied by terrorizing anxiety. The OCD has the ability to produce doubt or question memories, real or imagined. Additionally, OCD encourages you to monitor sexual urges as part of the evidence-gathering process. Based on the importance that pOCD places on sexual attraction, your brain constantly draws attention to sexual arousal — for example, the presence of an erection or vaginal lubrication in the wrong setting becomes evidence for OCD’s case against you. This increased monitoring allows for a case of mistaken identity in which any microscopic movement is determined to be arousal towards children. Taken together, unwanted thoughts, images, and urges can persuade an individual with pOCD that they are a sexual deviant.

Among the many themes within OCD there is perhaps no theme that carries more shame, guilt, self-loathing, and stigma than pOCD. Despite the fact that there is no tangible difference between OCD themes in terms of development, maintenance, and treatment, those suffering with pOCD tend to take ownership of their OCD and view themselves as repugnant, vile, terrible people. In line with this stigma, those suffering with pOCD are almost always hesitant to describe what they are experiencing to a psychologist (if they are lucky enough to recognize that this is OCD). The word “pedophile” or “molester” is often whispered inaudibly during the initial sessions. Descriptions of pOCD are typically preempted with questions regarding

confidentiality or previous experience treating OCD or a warning that “you may judge me and think this is atrocious but here goes.” The idea of coming to therapy and talking about something that is deemed so shameful feels like an impossible undertaking. This is unfortunately reinforced by society and, to a lesser extent, the mental health field, which does not have an adequate understanding of pOCD. Numerous therapists make the harmful mistake of informing someone with pOCD that this is not OCD, that they are a dangerous individual, and/or should be seeking sex therapy. Sadly, this promotes the message to the pOCD sufferer that they are horrible people who do not have OCD — which is not the case.

Spikes tend to revolve around past, current or future behavior.

#### Common past-oriented spikes

- “Did I ever do anything inappropriately sexual when I was younger?”
- “Did I do anything recently that was sexually inappropriate?”
- “Have I ever been attracted to an adolescent or child?”
- “Did I ever molest anyone?”
- “Could ambiguous action X be construed as sexual?”
- “Have I accidentally clicked on child porn?”
- “Does a person from my past know something that suggests I’m a pedophile?”

#### Common present-oriented spikes

- “Am I attracted to this 10-year-old in front of me?”
- “Was I just checking out this 13-year-old girl?”
- “Did someone just notice me doing something strange?”
- “I should stand on the other side of the subway, away from this 6-year-old boy so that I don’t impulsively grope him.”
- “Am I sexually aroused by this little girl on TV?”

#### Common future-oriented spikes

- “How do I know I will never engage in pedophilic behavior?”
- “What if, one day, I really am attracted to children?”
- “What is the right way to hold/hug/change a child?”
- “What if I get arrested and go to jail?”
- “Will I be creepy or do something inappropriate when I have a baby?”

Reassurance seeking is common within this theme. Individuals with pOCD will ask friends and loved ones questions aimed at figuring out this threatening unknown. Endless hours are spent mentally ruminating in an attempt to alleviate anxiety. Checking the physical environment to ensure that insidious behavior has not occurred is also common. Incessant answer seeking also occurs on the Internet through Google searches and online forums. Common searches include looking up infamous pedophiles and comparing to oneself or sifting through legal jargon to prepare for feared consequences. The hope is to find a nugget of information from anyone — anywhere — that will extinguish the horrific threat. The Internet can be an extremely debilitating weapon that leads individuals with pOCD down the proverbial rabbit hole.



There is a considerable amount of testing that takes place within this theme. Individuals with pOCD feel compelled to compare their thoughts, feelings, behaviors, and sexual arousal when they are around adults and children. The hope is that this will serve as a pedophilia litmus test. As mentioned earlier, this inevitably yields a multitude of false positives that leads to further ritualizing. While all of these rituals serve to temporarily relieve anxiety, they ultimately prevent someone with pOCD from progressing in treatment.

Avoidance plays an important role in the perpetuation of pOCD. Individuals suffering with pOCD will do everything in their power to ensure that these fears do not come to fruition. As is the case with all forms of OCD, escape and avoidance maintain and exacerbate the anxiety. In response to an impulsivity fear, one may stand as far away as possible from a minor or escape the situation altogether. Avoiding children at parks, museums, or nearby schools helps to ensure that these thoughts, images, and feelings will not surface. In line with avoidance, some individuals may choose not to have children of their own in order to limit the danger that they feel they pose to children.

Treatment for pOCD entails engaging in exposure therapy while simultaneously addressing the shame resulting from stigma discussed above. Facing the fear head on while limiting ritualistic behavior is the most effective way to manage OCD. This includes intentionally placing oneself in situations that will progressively provoke more challenging unwanted intrusive thoughts and accompanying anxiety. An emphasis is placed on situations that are inducing a desire to escape or avoid. Sample exposure items include going to public parks, looking at pictures of children, watching movies such as *The Lovely Bones*, or reading news stories about pedophiles.

The goal of these challenging exposure exercises is to let unwanted thoughts be present while allowing anxiety to dissipate organically. Taking this “risk” feels impossible but, after engaging in exposures consistently and repeatedly, the rational brain (the real you) can dominate the conversation. When anxiety is allowed to naturally dissipate, threatening situations are no longer perceived as such and one does not feel relentlessly compelled to resolve questions related to potential for pedophilia. This theme can become irrelevant through exposures and response prevention. For more information about symptoms, treatment, and support for intrusive thoughts, visit [iocdf.org/about-ocd](https://iocdf.org/about-ocd) and [www.intrusivethoughts.org/ocd-symptoms](https://www.intrusivethoughts.org/ocd-symptoms)

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Re: Introducing myself

Posted by Human being - 19 Dec 2022 04:58

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i used to suffer from POCD very badly. Thank god i now know I'm not a pedophile, not a molester, but a normal human being. Ever since realizing it was OCD/anxiety and not actual desire my POCD has completely gone away.

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Re: Introducing myself

Posted by i-man - 19 Dec 2022 06:45

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?I think its time for me to work on my curiosity.

You are correct, Cordnoy is not dumb (just read through some of his contributions over the years) and while he will be the first to say how he is nothing special, he is .During his time on Gye, he has helped a significant number of people in real tangible ways.

Although the forum to a large degree is based on people encouraging each other and providing a listening ear/ support network, sometimes that's not the correct approach. I read what was originally written, and I do empathize with and feel no ill judgment toward this fellow, however this is something that can have serious ramifications on people's lives and that's why he said what he did ,and as the other mod wrote they will work to assist him ( I n a way that chizuk would probably not be effective),

Have a great Chanukah.

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Re: Introducing myself

Posted by i-man - 19 Dec 2022 06:58

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Deleted due to being made irrelevant .

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Re: Introducing myself

Posted by DavidT - 19 Dec 2022 14:43

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[Geshmak! wrote on 19 Dec 2022 04:35:](#)

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I can tell one thing it was nothing major we all have our own struggles and he happened to post it a little geographically... Im telling I watched and did way worse stuff than my dear friend nsc...

We should not scare away anyone and I'm sure that noselfconfidence is a good person but to say *It was nothing major?! really?*

If you would know how many families and lives were already destroyed from the after affects of such actions that he wrote about (unfortunately I do know) , I don't think you would say it's not major.

There's a reason that Cordnoy and Chaimmod reacted as they did - I for one agree with them 100%

And I repeat to @noselfconfidence - we are here for you and we want to help you! Stay Strong!

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Re: Introducing myself

Posted by iLoveHashem247 - 19 Dec 2022 14:56

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The ability to understand that a behavior is absolutely unacceptable while not getting depressed or ?????? from that knowledge is an integral ingredient to success especially in this area.

it's kind of like comprehending the disaster intellectually while disassociating from the fallout emotionally, and allowing yourself to take immediate and decisive action.

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Re: Introducing myself

Posted by Teshuvahguy - 19 Dec 2022 16:12

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Anyone who expresses a sexual attraction to, or eroticization of, a toddler deserves our compassion and support. However, this is a huge red flag that can be endangering the child who is the object of that attraction or eroticization. This person must be encouraged to get help, and the child in question must be protected at all costs, as the damage that will be done to this innocent child will be severe and lifelong. We need to be a supportive group, but there is some behavior that is beyond the pale. So far, it does not appear that nsc has translated his feelings into actions, but if he does, he will be causing incalculable harm.

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Re: Introducing myself

Posted by Eerie - 19 Dec 2022 17:12

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to my dear friend Geshmak!, I respect you very much but you gotta respect this place and the people that run it. We all have a freedom of speech protected by the constitution, so you can say whatever you like(remember we do have a Torah to live by), you can have your own opinion, but you gotta respect the place your in. And excuse my bluntness, I'm new here and don't have much experience, this one was a learning one for me, but thank goodness this place has moderators with their heads screwed on straight. Yes, we all need help and if we apply ourselves we can beH be helped, but there is a line that delineates sickness from crime. I do not propose to define it, but the bottom line is that the type of things that may or may not be written here are for the moderators to decide and you and I and everyone here should respect that, not second guess them or post our disagreement. You can disagree with me about this as well, and you can post it if you like, but please give it a moment of thought. The moderators don't care what you write, they don't mind if you disagree with them, but think for one minute if maybe YOU should care. Whom are you helping by disagreeing with the moderators? Are you teaching people ideas that will help them? Remember, what you post is read by many people, what is the message that they walk away with? There's teshuva, there's help, but if I did something worse does that make it ok for someone to molest his child? I'm sorry if I'm too blunt. I beg your forgiveness. Again, there's a line between sick people and criminals, and where that line is we might disagree upon, and that's fine, all people disagree, but there has to be a system for keeping things in check, and there are people who have that job. Respect their decision.

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