



Effectiveness Of Information Communication Technology (ICT) Based Teaching Program On Knowledge Regarding Compulsive Hoarding Disorders And Health Among Higher Education Level In Madhya Pradesh.

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ABSTRACT

Obsessive-compulsive disorder (OCD) is a truly ordinary condition, consistent in nature, portrayed by the presence of two fundamental parts, explicitly obsession and inspiration.

Another fundamental part associated with the disorder is anxiety. This disorder truly handicaps socio-occupational working and is associated with a fourfold bet of joblessness stood separated from individuals without a psychiatric diagnosis.

The World Health Organization (WHO) has made sense of OCD as one of the really 10 explanations behind living with sickness related handicap on account of the predictable and squashing nature of the infection.

Despite how the appropriate thought of obsessive-compulsive disorder may be extraordinarily later, the disorder appears to have taken changed structures in the distant past too. The symptoms of OCD are portrayed in Shakespeare's decent play 'Macbeth', where Macbeth's perfect accomplice releases an impression of being obliged to wash.

It was solely during the nineteenth century that more contemporary and sound considerations of OCD emerged. The obsession was seen from the fantasy, with the protecting of sufficient information. Compulsions were additionally seen from impulsivity which included paroxysmal and overpowering exercises. The symptoms of obsessions and compulsions were first associated with the psychosis making by Esquirol in his Course book of Psychiatry, conveyed in 1838. This book depicts OCD as 'shaky monomania'. It suggests necessary development that started in the absence of the discerning labor force rather than in reason or feeling. It transmitted an impression of being that need couldn't cover the development that care had rejected.

OCD was named an anxiety spectrum disorder until the DSM-IV-TR and its earlier revives, since obsessions reliably lead to raised levels of anxiety, making it an issue for the individual. This anxiety then, subsides by partaking in the compulsive demonstration. Another avocation for this classification was that OCD can reliably be associated with other anxiety disorders moreover.

OCD structures a substitute class of disorders in the Expressive and Statistical Manual of Mental Disorders-5 (DSM-5) as well as the International Classification of Disorders-10 (ICD-10).

INTRODUCTION

Hoarding disorder is a consistent difficulty that is depicted by the calm accommodation or separation of property as necessary to protect it. An individual encountering hoarding disorder experiences trouble at the chance discarding things. There is an excessive hoarding of thing no matter what the guaranteed worth. Hoarding continually makes such restricted normal conditions that homes can be totally filled, simply close pathways turning through stores of untidiness. Edges, sinks, stoves, workspaces, steps and essentially any additional surfaces are stacked with the stuff. Moreover, when there's no space inside, wreck can release out over into garages, vehicles, yards, and other extra rooms.

Hoarding goes from delicate to incredible. Occasionally hoarding couldn't much affect your life, while in various cases it truly affects you're working constantly.

Passion is a mental peculiarity and can take basically any arrangement. It will in regular be a thought, an image, a thought, a drive, or a tendency that is gifted basically a few times and rudely and is exceptionally upsetting to the individual. The solitary trusts these considerations or contemplations to be his own, yet can't baffle their undeniable dullness. The client could attempt to struggle with these obsessions. This resistance distinguishes the obsessions experienced as a piece of this disorder from horrendous mindful behaviors and social or serious social endeavors.

In the DSM-5, another obsessive-compulsive (OC) and related disorders are also depicted by preoccupation and overflow behaviors or insane demonstrations due to obsessions. Body dysmorphic disorder reviews an incredible preoccupation with a nonexistent twisting for one's appearance, causing fundamental disrupting impact and impedance of typical working or something to that effect. Their commitment is amazing and screwed up even with the most humble anomaly. Hoarding disorder is depicted by difficulties in surrendering assets, regardless of anything else their value. This disorder reliably makes strain with respect health and tidiness, especially while hoarding of food things, animals, etc is involved.

Trichotillomania is compulsive hair pulling, achieving fundamental reducing up top. Stripping is a skin picking disorder that results in senseless tissue mischief and skin wounds. Substance or prescription instigated OC and related disorders are depicted by intoxication or withdrawal from a substance or the improvement of obsessions and compulsions following receptiveness to a drug.

Symptoms of OC and related disorders can correspondingly arise as a direct pathophysiological consequence of another illness, as by moderation of OC and related disorders thinking about another infection. Sometimes, the symptoms can be exceptionally disturbing to the individual and may moreover debilitate working in fundamental locales, yet may not satisfy the full principles of any OC and related disorders. Such cases are collected under the class of other picked OC and related disorders.

BACKGROUND OF THE STUDY

A few etiological models of OCD have been prescribed that add to the overall impression of the disorder. A piece of these speculations have used far reaching and unmistakable consistent frameworks to give essential observational confirmation on the fundamental designs of the disorders. Some of them give explanations to simply a subset of OCD symptoms.

1.2.1 Biological. Dysregulation of a few neurotransmitters has been caught in discretionary effect improvement of obsessions and compulsions, which has been maintained by a few clinical cure fundamentals. The neural connection in some cases associated with the improvement of OCD symptoms is serotonin. SSRIs have been seen as more effective than drugs that affect various neural connections. Regardless, it isn't known whether serotonin difference is associated with causing OCD or whether it is an effect of encountering the disorder. The noradrenergic structure has in like manner been caught in causing improvement in symptoms after administration of norepinephrine criminals. In any case, more evidence is expected to appear at adequate choices with respect to brokenness of the noradrenergic structure. There are serious areas of strength for nearly for a section to OCD, with first-degree relatives of clients with OCD being on various occasions bound to show comparable symptoms (Chamberlain et al. 2008). The concordance rate is unendingly out higher for monozygotic twins than they are for dizygotic twins. A higher occurrence of OCD has been tended to in first-degree relatives. Anyway, the disclosures of Indian studies have not been dependable. Indian studies tracked down either no expansion in the bet of encountering OCD or comprehensively not exactly those point by point by past studies in Western social classes (Guruswami, Relan and Khanna 2002).

1.2.1.1 Pharmacological treatment. Pharmacotherapy is, if all else fails, the fundamental line of treatment for OCD. The most regularly used drugs coordinate selective serotonin reuptake inhibitors (SSRIs), serotonin norepinephrine reuptake inhibitors (SNRIs), and tricyclic antidepressants like clomipramine. Anyway immense clients answer the medicine; the break certainty rate is normally high. Thusly, broadened length pharmacotherapy may be proposed. Patients who answer the meds have a decreasing in their symptoms by around 40%.

A meta-assessment of controlled drug presentations on individuals with OCD was performed by Geller et al. (2004). To evaluate the definite confirmation with respect to contrasts in sufficiency of pharmacological treatments. Twelve studies with a model size of 1,044 pediatric and adolescent individuals were associated with the overview. The diagram saw clomipramine as more effective than SSRIs with various aspects. Regardless, they don't recommend that clomipramine should be proposed as the fundamental line of treatment since it is customarily joined by different optional effects. It has similarly been seen as less direct for young people than SSRIs. Serotonergic drugs were seen as totally more effective than counterfeit treatments.

1.2.1.2 Electroconvulsive therapy (ECT). ECT as a treatment for OCD has been seen as enormous essentially in outrageous and irksome cases. It is similarly effective when the patient reports OCD with serious associative shortcoming. Exposures about the effectiveness of ECT for fundamental resolute OCD have not been very self-evident.

PROBLEM IN HAND

Serotonin (5-HT): Biological models of OCD have gotten the effect of serotonin (5-HT) in the development of OCD. Clinical starters of various serotonergic drugs support the association of serotonin neurotransmitters in obsessive-compulsive disorder. Evidence for an endeavor of serotonin in OCD begins from the counter obsessive effects of clomipramine (CMI), it has an additional a verifiable 5-HT reuptake blocking effect than various tricyclics, which are less valuable. Decline in OCD symptoms differentiates and lessened serotonin levels of platelets and cerebrospinal fluid (CSF) 5-hydroxyindoleacetic unpleasant (5-HIAA) during clomipramine treatment (Flament et al. 1985; Thoran et al. 1980).

In unambiguous studies oral methyl-chlorophenyl-piperazine (MCP), a selective 5-HT receptor agonist, has been found to rapidly deteriorate obsessive symptoms in OCD patients (Zohar, 1986). The concentrate by Hollander (1987) other than granted that extended serotonergic progression adds to OCD.

Dopamine: The solid effect of co-administration of dopamine inhibitors and SSRIs in a subset of patients with OCD and fit disorders has proposed an effect for dopamine brokenness (McDougall et al., 1990). A review evaluating the levels of platelet sulfotransferase, a compound pulled in with catecholamine catabolism (gives a marker of presynaptic dopamine work), diminished levels of platelet [3H]mipramine restricting and coordinated in levels of sulfotransferase activity in OCD point by point increase. evaluation with control. This offers further assistance for diminished 5-HT headway and widened dopamine transmission in OCD.

(b) Immune Parts In a few studies, there is affirmation of a few association among OCD and autoimmune disorders of the basal ganglia, for example Sydenham's chorea, supporting the hypothesis of basal ganglia brokenness in OCD. A strong association between OCD has correspondingly been tended to. /Tourette's condition and B-cell antibodies D8/17.

(C) Brain imaging studies PC assisted imaging types of progress with canning be apportioned into two huge procedures. Regardless, those isolating brain structures, called 'fundamental imaging', consolidate figured tomography

(CT) and drawing in reverberation imaging (MRI). Second, those that development metabolic or biochemical endpoints, called 'functional imaging procedures', consolidate single photon emission tomography (SPECT), positron emission tomography (PET) and quick or functional MRI (fMRI). These procedures have been used to focus on the explanations behind OCD.

(a) Ventricular-brain ratio (VBR): There are two essential disclosures concerning VBR in subjects with OCD, yet the result areas of strength for aren't. Behar and associates (1984) saw CT breadths of 16 energetic adult OCD patients and 16 matched normal controls and found unendingly out higher VBR in OCD patients than controls. Notwithstanding, Insel et al. (1983) saw CT aftereffects of 10 OCD patients and 10 matched common controls and found no ability in VBR. More studies are expected to grasp the gig of VBR in OCD patients.

(b) Lateral Ventricle Volume: Results connecting with lateral ventricle volume are also clashing. Stein et al. (1993) used CT to survey lateral ventricular volume in 16 OCD patients (isolated into 8 sub-loads with fundamental neurological sensitive sign anomalies and 8 with unimportant peculiarities) and 8 innocuous patients crying of headache. The audit showed that the patient with high sensitive sign had a basically higher lateral ventricle volume than both connection social occasions. Luxenberg and associates (1988) examined CT degrees of 10 OCD patients with those of 10 conventional controls, but they found no separation in the size of the lateral and third ventricles between the two social occasions. Notwithstanding, they coordinated contrasts in the size of the caudate spot that were basically more unassuming in OCD patients.

Objectives of the study

1. To study the status of compulsive hoarding disorders of higher education level students and their health condition in MP.
2. To study of knowledge regarding compulsive hoarding disorders and health among in the context or ICT based teaching program.
3. To study knowledge regarding compulsive hoarding disorder health among students after implementation of ICT.
4. To compare effectiveness of ICT regarding compulsive hoarding disorder and health among UG, PG students in MP.

Hypothesis

H₁: There is no significance difference in Boys and girls students at higher education level. H₂: There is no significance difference of ICT based education teaching program.

H₃: There is no significance difference of ICT based education teaching program among UG PG students.

NEED OF THE STUDY

Behavioral factors and learning speculation: a renowned behavioral model of the procurement and backing of obsessive-compulsive qualities, tended to by Shaper's (1939) two-stage learning speculation. According to this speculation in OCD stage 1 anxiety is overall outlined to a specific environmental occasion (old style shaping). The particular then, takes part in compulsive administrations (the obnoxiousness/revulsion response) to diminish anxiety. Enduring anxiety is effectively diminished, compulsive behavior will indeed occur from here on out (stage 2 or operant trim). Greater ubiquity outlining likewise occurs in OCD when words, pictures, or considerations are associated with the fundamental lift, and the associated anxiety ejects. The inability to cover obsessive considerations occurs as the patient develops, endlessly avoids behaviors that lead to anxiety (Rachman and Hadson, 1980). The behavioral therapy procedure Straightforwardness and Response Evasion (ERP) streams directly from this hypothesis.

1. Study will confirm the effect of ICT based education about compulsive hoarding disorders.
2. Study will find a way to deal with the compulsive hoarding disorder.

RESEARCH METHODOLOGY

In this chapter, research methods have been portrayed, which is a critical stage in the study work. Study method and equipment are the premise of the entire study. It is critical to pick suitable research method and equipment for research work. Research work can be convincing and huge essentially by picking the right and suitable method and equipment, so it is fundamental that the selection of research method and equipment should be done watchfully.

To manage in any field, we should be aware of the current situation of that area, whether it is educational, cash related, social or political. To likewise develop the education system, it is fundamental to acknowledge what is the condition of education at present; truly around then would any new development have the option to be taken. The work that is done in an arranged manner to sort out these conditions is called receptiveness or research.

SAMPLE DESIGN

A sample is a subset of the study population or a tiny portion of it. Further more, it is not feasible to communicate with the whole population of the section on which we do research. As a result, we choose just a tiny portion of the target population. The process of choosing instances to be included in a study of a representative of the target population is known as sampling.

The methodology adopted for this study was a combination of qualitative and quantitative. In particular therespondents such as males and females, different age groups, different cultural and social backgrounds and differing level of house

hold incomes would be considered.

SOURCE OF DATA

Data was obtained from both primary and secondary sources of data collecting to achieve the study's goal and perform the inquiry. Both methods were used to provide suitable results and more accurate conclusions.

Primary Data:

According to Creswell (1994), primary data collection refers to the gathering of information via research questionnaires, postal questioners, structured and semi-structured interviews, personal and telephone interview observation, and focus group discussions.

Questionnaires are the most generally used approach when the responder can be contacted and is ready to cooperate. They are a fairly easy method that can reach a big number of people at a cheap cost, and we can gather the data that the researcher need for the study.

Secondary Data:

It indicates that the data has already been gathered and is being used for other research. However, that data is not sufficient for the study, therefore secondary data was employed. Secondary data was gathered from a variety of sources, including websites, journals, articles, statistics departments, bank websites, and other reports.

DATA ANALYSIS

The collected data the data was collected, tabulated and presented in the form of pie chart graphs and tables and SPSS was used for testing of hypothesis.

During the real analysis of the table, the study of the even subject matter and the similitude's, differences, patterns and significant reasons present in it is engaged.

In this way, it is important for us to examine the data to get the best knowledge. It is essential for each researcher to arrange and organize his data. In the present research, the researcher has attempted to present the data by breaking down and arranging them, organizing them with the goal that the research conclusions can be drawn without any problem.

Presented By arranging the data got from the results in the chapter, utilizing statistical measures like percentage, mean, standard deviation, chi-square test, correlation coefficient and critical ratio value and so forth, the hypotheses developed for the research study were analyzed.

Table no. 1: Age-wise Classification of Respondents

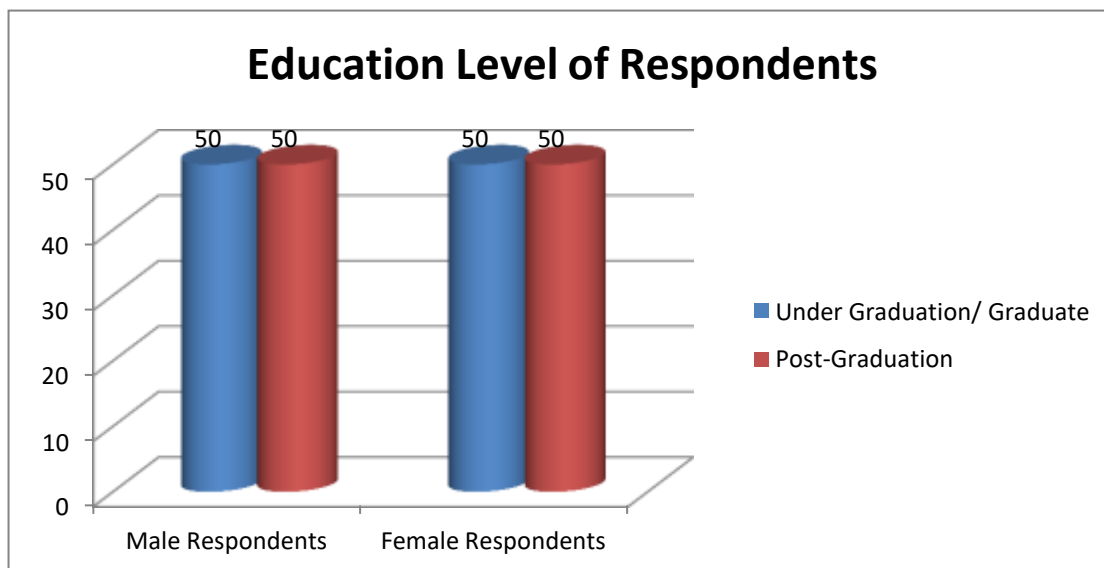
S. No.	Gender	No.
1.	Male	200
2.	Female	200
	Total	400

Analysis:

It is clear from above Table no. 4.2 that out of total 400 respondents, 200 were males and 200 were females.

Table No.- 2: Classification of Respondents on the basis of education

S. No.	Education of Respondent	Male Respondents		Female Respondents	
		No.	Percentage	No.	Percentage
1.	Under Graduation/ Graduate	100	50	100	50
2.	Post-Graduation	100	50	100	50
	Total	200	100	200	100



Analysis:

It is clear from the above table that out of total 200 male respondents, the 100 respondents are under graduate or graduate while 100 respondents are post graduate.

The table shows out of total 200 female respondents, the 100 respondents are under graduate or graduate while 100 respondents are post graduate.

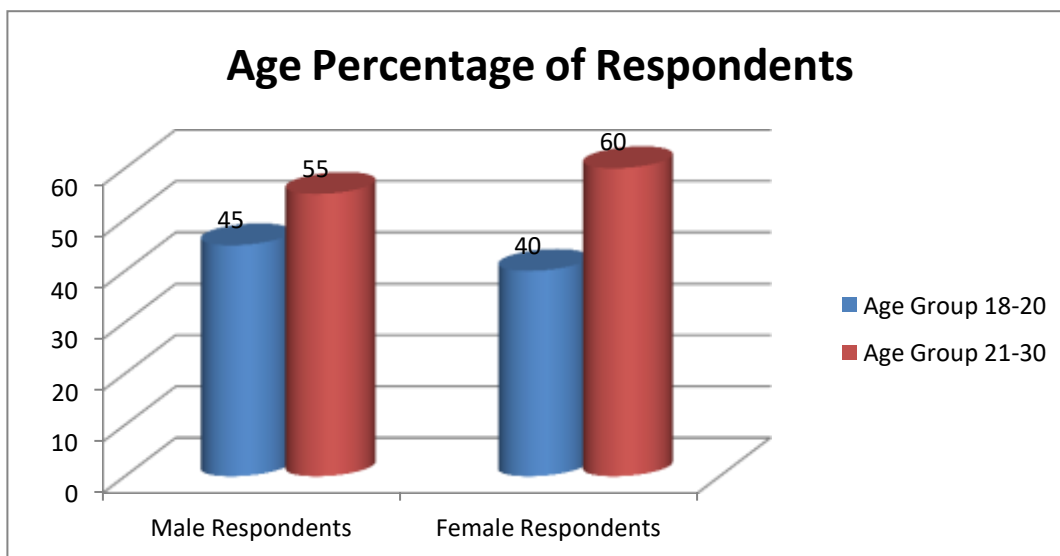
Table no. 3: Age-wise Classification of Respondents

S. No.	Age-Group	Male Respondents		Female Respondents	
		No.	Percentage	No.	Percentage
1.	18-20	90	45	80	40
2.	21-30	110	55	120	60
	Total	200	100	200	100

Analysis:

It is clear from above Table no. 4.3 that out of total 200 respondents, the age group between 18-20 years were 90 males and 80 females.

Similarly, out of 200 respondents, 110 males and 120 females were of the age between 21-30.



Interpretation-

The above diagram shows the age percentage of selected respondents. According to which, the percentage of respondents in the age group of 18-20 years is 44.5 and the percentage of age group 21-30 years is 55.5.

Table No. 4: Classification of respondents on the basis of symptoms of hoarding disease

S. No.	Symptoms of Compulsive Hoarding Disorder	Male Respondents		Female Respondents	
		No.	Percentage	No.	Percentage
1.	Yourself	26	13	42	21
2.	In others	174	87	158	79
	Total	200	100	200	100

Analysis

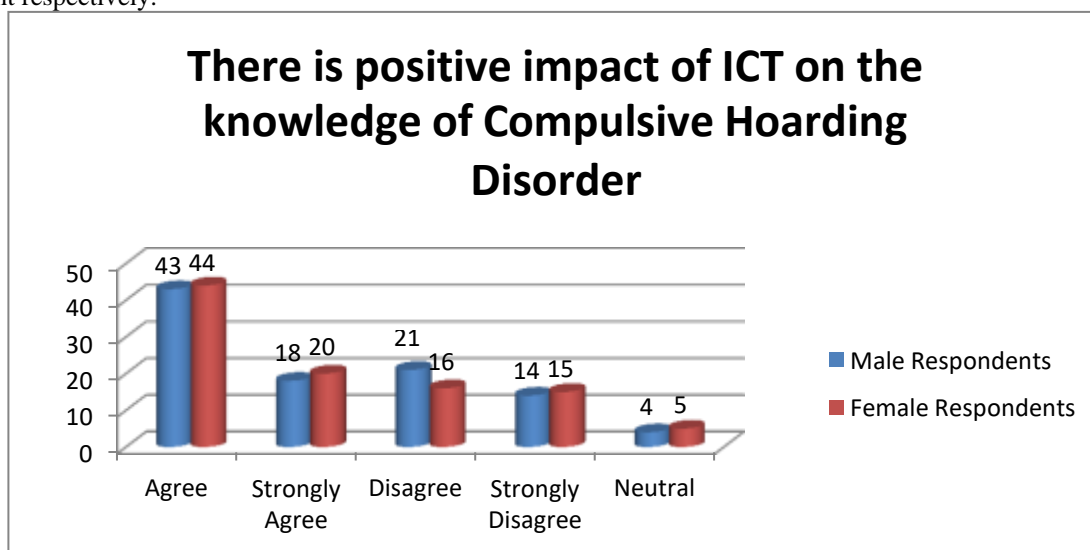
It is clear from the above table that out of total 200 male respondents, 174 respondents found CHD symptoms in others while 26 respondents found in their selves. Similarly, out of total 200 female respondents, 158 respondents found CHD symptoms in others while 42 respondents found in their selves.

Table No. 5: Classification of respondents on the basis of impact of ICT on the knowledge of Compulsive Hoarding Disorder

S. No.	Do you think that there is positive impact of ICT on the knowledge of Compulsive Hoarding Disorder?	Male Respondents		Female Respondents	
		No.	Percentage	No.	Percentage
1.	Agree	86	43	88	44
2.	Strongly Agree	36	18	40	20
3.	Disagree	42	21	32	16
4.	Strongly Disagree	28	14	30	15
5.	Neutral	8	4	10	5
	Total	200	100	200	100

Analysis

It is clear from the above table that out of total 200 male respondents, 86 respondents agree that there is positive impact of ICT on the knowledge of Compulsive Hoarding Disorder while 36 and 42 respondents were ‘strongly agree’ and ‘disagree’ with this statement respectively. On the other hand, 28 and 8 respondents were ‘strongly disagree and ‘neutral with this statement respectively. Similarly, out of total 200 female respondents, 88 respondents agree that there is positive impact of ICT on the knowledge of Compulsive Hoarding Disorder while 40 and 32 respondents were ‘strongly agree’ and ‘disagree’ with this statement respectively. On the other hand, 30 and 10 respondents were ‘strongly disagree and ‘neutral with this statement respectively.



Interpretation:

It is clear from the above graph that majority of the male respondents i.e.43% agree that there is positive impact of ICT on the knowledge of Compulsive Hoarding Disorder.

Similarly, majority of the female respondents i.e. 44% agree that there is positive impact of ICT on the knowledge of Compulsive Hoarding Disorder.

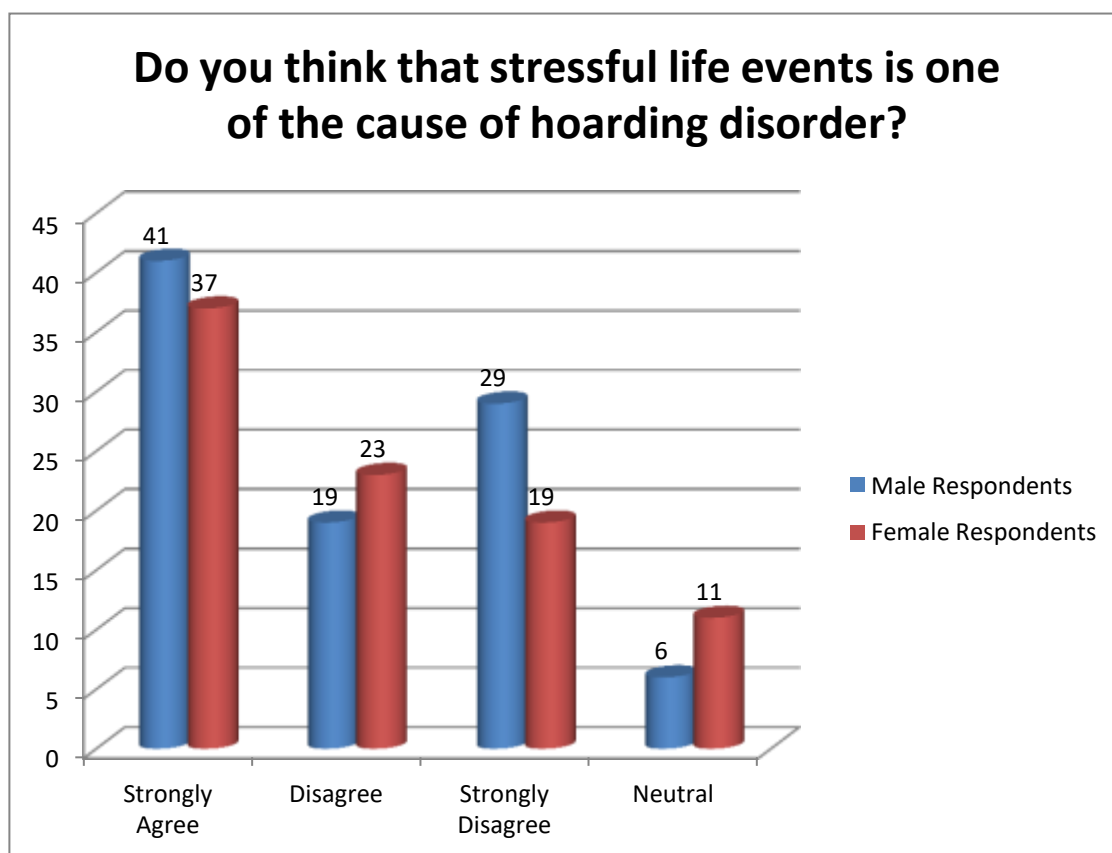
Table No.6: Classification of respondents on the basis of stressful life events as the cause of hoarding disorder.

S. No.	Do you think that stressful life events as the cause of hoarding disorder?	Male Respondents		Female Respondents	
		No.	Percentage	No.	Percentage
1.	Agree	82	41	74	37
2.	Strongly Agree	38	19	46	23
3.	Disagree	58	29	38	19
4.	Strongly Disagree	12	6	22	11
5.	Neutral	10	5	20	10
	Total	200	100	200	100

Analysis

It is clear from the above table that out of total 200 male respondents, 82 respondents agree that stressful life events is one of the cause of hoarding disorder while 38 and 58 respondents were ‘strongly agree’ and ‘disagree’ with this statement respectively. On the other hand, 12 and 10 respondents were ‘strongly disagree and ‘neutral with this statement respectively.

Similarly, out of total 200 female respondents, 74 respondents agree that stressful life events is one of the cause of hoarding disorder while 46 and 38 respondents were ‘strongly agree’ and ‘disagree’ with this statement respectively. On the other hand, 22 and 20 respondents were ‘strongly disagree and ‘neutral with this statement respectively.



Interpretation:

It is clear from the above graph that majority of the male respondents i.e.41% agree that stressful life events is one of the cause of hoarding disorder.

Similarly, majority of the female respondents i.e. 37% agree that stressful life events is one of the cause of hoarding disorder.

Discussion

ICT standards, elevate get to, non-charge blocks, got by and large in the general exchange. In addition, Risk Examination Essential Control Point (HCCP) moreover turned out to be very certain which concerns cleansing. Unbending quality principles of food things set by made nations ought to be consented to by conveying nations. What packs battled in the agro region solidify food assortments created beginning from the earliest stage, rice, guar gum, planting and oats, meat, dairy and poultry things.

Anantapur DIC in Andhra Pradesh for the period 1988-1998, and bring out disclosures and ideas. Execution of the DIC is evaluated through five markers: different more restricted size and little devices set up, (b) work made, (c) financial help gave,

(d) number of country craftsmans helped with credit, and (e) number of ordinary craftsmans organized.

Progress on the pointers was all collected from the DIC records yearly, and information were managed. These markers spread the progress in metropolitan and provincial zones of the area. The push of DIC's exercises is on movement of downsized scale and little contraptions, and work age in country and semi-metropolitan zones, and plan of single window associations of different data sources expected for mechanical improvement. Evaluation was pursued for the year-wise information on progress of how much units set up, fixed experience prepared, and turn out made for all of the new units (year-wise aggregate), and industry pack insightful for eight thing social events, explicitly, agro-based, compound based, manufacturing, backwoods based, prepared animals based, mineral-based, material, and different associations.

Rick L Edge Man and John P Dugan from school of Idaho, clear that ICT headway and setup made in collecting conditions, but their course of action is rapidly stretching out to application in organization regions including, perhaps most conspicuously, social protection. This paper discusses ICT improvement and design as interdisciplinary strategies with potential for limit - crossing point and novel applications that are still up in the air by mechanical movement, but maybe simultaneously by moral worries. Associated with the discourse are military and defend applications similarly as ones related to society, energy and normal conservation, and potential for applications in such 'sensitive' districts as fervor, social uniformity and human execution.

CONCLUSION

The cognitive behavioral technique of obsessive-compulsive disorder: the fundamental cognitive model of OCD proposes that patients with this disorder survey nosy considerations in an excellent way. Instead of having the choiceto pardon them, individuals with OCD truly trust that intruding on considerations to be surprisingly fundamental as well as discovering some center ground, and as such set forward attempts to control their occurrence. The fundamental demonstration of concentrating on one's considerations is a metacognitive procedure. It recommends opinions about thinking and the frameworks used to perpetually control thinking.

The term metacognition was at first sorted out by Flavell (1979). The cognitive-behavioral model suggests that individuals with OCD hold different express saved convictions or convictions that lead to their obsessive anxiety. A piece of these are metacognitive in nature. For example, mix of thought-movement, more unmistakable meaning of considerations and need for control over appraisals.

The dynamical aspects of OCD were first depicted by Sigmund Freud, recommending that obsessive symptoms are the aftereffect of ignorant fundamental motivations that could significant solid areas for be sexual in nature. These essential impetuses cause senseless anxiety which is avoided by screen structures; OCD makes when these protections neglect to control the anxiety.

Epic progress has been made today as shown by the perspective of brain science. The specialists featured four fundamental protect instruments. These were separation, fix, reaction progress and dislodging.

Separation of Effect: Disconnection is an undertaking to restrict a tendency or effect from the thought, creative brain or drive associated with them. By this watchman part the mental self view restricts the effect from the thought causing the anxiety, eventually, the thought really remains in the attention to the individual. Regardless, the effect will overall be free and associated with an impartial idea or lift. As such these unprejudiced evaluations brief anxiety and change into obsessions.

REFERENCES

1. Abernethy III, R.S., Abrams, A.R., Alonso, A., Alpay, M., & Alpert, J.E. (2008). Stern: Massachusetts General Hospital Comprehensive Clinical Psychiatry, 1st ed.
2. Abramowitz, J. S., S. Whiteside, D. Lyn am, and S. Kalsy. 2003b. 'Is thought-action fusion specific to obsessive-compulsive disorder? : a mediating role of negative affect.' Behaviour Research and Therapy, 41(9): 1069-1079.
3. Abramowitz, Jonathan S. 1997. 'Effectiveness of psychological and pharmacological treatments for obsessive-

- compulsive disorder: a quantitative review.' *Journal of consulting and clinical psychology*. 65 (1): 44-52.
4. Abramowitz, Jonathan S., and Brett J. Deacon. 2006. 'Psychometric properties and construct validity of the Obsessive-Compulsive Inventory—Revised: Replication and extension with a clinical sample.' *Journal of anxiety disorders*. 20(8): 1016-1035.
 5. Abramowitz, Jonathan S., Martin E. Franklin, Stefanie A. Schwartz and Jami M. Furr. 2003a. 'Symptom presentation and outcome of cognitive-behavioral therapy for obsessive-compulsive disorder.' *Journal of consulting and clinical psychology*. 71(6): 1049-1056.
 6. Abrams LC, Lee Westmaas J, Bontemps-Jones J, Ramani R, Mellerson J. A content analysis of popular smartphone apps for smoking cessation. *Am J Prev Med*. 2013 Dec;45(6):732-6. doi: 10.1016/j.amepre.2013.07.008. PMID: 24237915; PMCID: PMC3836190.
 7. Adolescence, Preetika, *J Psychol Abnorm Child* 2015, 4:3 <http://dx.doi.org/10.4172/2329-9525.1000143>
 8. Ahmed AA, Patel K, Nyaku MA, et al. Risk of Heart Failure and Death After Prolonged Smoking Cessation: Role of Amount and Duration of Prior Smoking. *Circ Heart Fail*. 2015;8(4):694-701. doi:10.1161/CIRCHEARTFAILURE.114.001885
 9. Airaksinen, E, Wahlin, A, Larsson, M., & Forsell, Y. (2006). Cognitive and social functioning in recovery from depression: results from a population based three year follow-up. *Journal of Affective Disorders*, 96, 107-110
 10. Alavinia, P., & Mollahosseini, H. (2012). On the correlation between Iranian EFL learners' use of metacognitive listening strategies and their emotional intelligences. Retrieved October 1, 2018 from www.ccsenet.org/journal/index.php/ies/article/download/21290/13802
 11. Alçı, B., & Yüksel, G. (2012). An examination into self-efficacy, metacognition and academic performance of pre-service ELT students: Prediction and difference. *Kalem Eğitim ve İnsan Bilimleri Dergisi*, 2(1), 143-165.
 12. Allen J. L, Rapee R. M, & Sandberg S. (2008). Severe life events and chronic adversities as antecedents to anxiety in children: A matched control study. *Journal of Abnormal Child Psychology*, 36:1047-1056.
 13. Altındag, Mustafa, & Senemoglu, Nuray. (2013). Metacognitive Skills Scale. *Hacettepe Üniversitesi Eğitim Fakültesi Dergisi [Hacettepe University Journal of Education]*, 28, 15-26.
 14. Altman, Sarah and Stewart Shankman. 2009. 'What is the association between obsessive-compulsive disorder and eating disorders?' *Clinical psychology review* 29(7): 638-646.
 15. Alvani, S. R., & Alvani, S. (2011). The Effect of Obesity on Self-Esteem among Pre University Iranian Students in Khashan City of Iran April 2009. *European Journal of Social Sciences*, 24(1), 48-54
 16. Alvarenga, Pedro G., Ana G. Hounie, Marcos T. Mercadante, Euripedes C. Miguel, and M. Conceicao. 2007. 'Obsessive-compulsive disorder: a historical overview.' *Handbook of child and adolescent obsessive compulsive disorder*. Mahwah, NJ: Erlbaum. 1-15.
 17. Alvarez-Jiménez M, Parker AG, Hetrick SE, McGorry PD, Gleeson JF. Preventing the second episode: a systematic review and meta-analysis of psychosocial and pharmacological trials in first-episode psychosis. *Schizophr Bull*. 2011 May;37(3):619-30. doi: 10.1093/schbul/sbp129. Epub 2009 Nov 9. PMID: 19900962; PMCID: PMC3080698.
 18. Álvaro Frías-Ibáñez, Carol Palma-Sevillano, Francisco Barón-Fernández, Inma Bernáldez-Fernández Elena Aluco-Sánchez (2014) Nosological status of compulsive hoarding: obsessive-compulsive disorder subtype or independent clinical entity, *Actas Esp Psiquiatr* 2014;42(3):116-24
 19. American Psychiatric Association. 2013. *Diagnostic and statistical manual of mental disorders* (5th ed.). Washington, DC: Author.
 20. Amir, Nader, Laurie Cashman, and Edna B. Foa. 1997. 'Strategies of thought control in obsessive-compulsive disorder.' *Behaviour Research and Therapy*, 35(8): 775-777.
 21. Amir, Nader, Melinda Freshman, Brian Ramsey, Erin Neary, and Bartholomew Brigidi. 2001. 'Thought-action fusion in individuals with OCD symptoms.' *Behaviour Research and Therapy*, 39(7): 765-776.
 22. Anand, Nitin and Mahendra Sharma. 2016. 'Obsessive compulsive beliefs and metacognitions in patients with obsessive compulsive disorder.' *Indian Journal of Mental Health*. 3(3): 278-286.
 23. Anatol J Family Med 2020;3(3):270-271 Sakshi Bhardwaj1, Abhinav Bhardwaj2, Ravi Parkash (2020) Impact of COVID-19 on Patients with Obsessive Compulsive Disorder: A Review, *International Journal of Science and Healthcare Research* Vol.5; Issue: 3; July-Sept. 2020 Website: ijshr.com
 24. Andersen, Barbara L., Robert J. DeRubeis, Barry S. Berman, Jessie Gruman, Victoria L. Champion, Mary Jane Massie, Jimmie C. Holland et al. 2014. 'Screening, assessment, and care of anxiety and depressive symptoms in adults with cancer: an American Society of Clinical Oncology guideline adaptation.' *Journal of Clinical Oncology*, 32(15): 1605-1619.
 25. Andouz, Zahra, Behrouz Dolatshahi, Nahaleh Moshtagh, and Asghar Dadkhah. 2012. 'The efficacy of metacognitive therapy on patients suffering from pure obsession.' *Iranian journal of psychiatry*. 7(1):11.