**Appendix A. Intervention descriptions for participants and partners**

1. **Overall general CBT description for participants**

Imagine that you have decided to seek professional help for an enduring problem with seeking reassurance excessively due to fear, low mood, or anxiety (e.g., about whether the stove is off or doors are locked, whether a relationship will last, or whether a situation is safe), which has been causing you distress, has interfered with your daily activities, and is getting in the way of your relationships. You have been coping so far with your fear, low mood, or anxiety by seeking reassurance from someone you know and trust.

You receive a referral to cognitive-behavioural therapy (CBT) clinic, and during your first appointment, you are informed that treatment involves approximately 12-20 weekly 50-minute sessions with a psychologist, and that one its key components is changing how your significant others (i.e., close family, friends) respond when you seek reassurance. You learn also that this type of treatment has a very good success rate if you adhere to it and complete all of the sessions and exercises.

During the treatment, you will receive psychoeducation about why reassurance-seeking can become a problematic behaviour over time, and about how eliminating the behaviour assists in overcoming mental health disorders. Together with the psychologist, you will develop a plan, to which you will have your significant others (e.g., close family and friends) agree, that clearly establishes what you typically do in situations when you seek reassurance, and how you would like your significant other(s) to respond instead in order to assist with treatment. Throughout the treatment, you will monitor your daily reassurance-seeking behaviour, along with other factors including your anxiety level.

**In order to customize the treatment to your specific preferences, the psychologist describes to you two possible variations of the available therapy procedure, which are presented on the following pages.**

**Please read each treatment description carefully as there may be subtle differences between them.**

1. **Overall general CBT description for partners**

Imagine that your family member or friend has decided to seek professional help for an enduring problem with seeking reassurance excessively due to fear, low mood, or anxiety (e.g., about whether the stove is off or doors are locked, whether a relationship will last, or whether a situation is safe), which has been causing him/her distress, has interfered with his/her daily activities, and is getting in the way of his/her relationships. S/he has been coping so far with fear, low mood, or anxiety by seeking reassurance from you and others that s/he knows and trusts.

Your family member or friend receives a referral to cognitive-behavioural therapy (CBT) clinic, and during his/her first appointment, s/he is informed that treatment involves approximately 12-20 weekly 50-minute sessions with a psychologist, and that one its key components is reducing how often his/her significant others (i.e., close family, friends) provide reassurance when s/he asks for it. Thus, if you are to help with the treatment, you would be asked to not respond to requests for reassurance by simply providing reassurance as you have in the past. Your family member or friend learns also that this type of treatment has a very good success rate if s/he adheres to it and completes all of the sessions and exercises.

During the treatment, s/he will received psychoeducation about why reassurance-seeking can become a problematic behaviour over time, and about how eliminating the behaviour assists in overcoming mental health disorders. Together with the psychologist, s/he will develop a plan, to which s/he would have significant others (e.g., close family and friends) including you agree, that clearly establishes what s/he typically does in situations when s/he seeks reassurance, and how s/he would like you to respond instead in order to assist with treatment.

The involvement of family members or friends in changing problematic reassurance-seeking behaviour is an important aspect of treatment. In order to customize the treatment to your specific preferences, the psychologist describes to your family member or friend **two possible variations of the available therapy procedure**, which are presented on the following pages.

Please read each treatment description carefully as there may be subtle differences between them.

1. **Support intervention for participants**

Although it will be challenging to confront situations that make you fearful or anxious without receiving reassurance, you will find that doing so will help you learn new information about your anxiety and about whether it is necessary to seek reassurance. Fear and anxiety are uncomfortable sensations, so people may engage in strategies such as reassurance seeking in order to make themselves feel more comfortable or safe.

People who seek reassurance tend to be able to predict in advance, quite accurately, how another person will respond, but still feel compelled to seek reassurance anyway. Reassurance-seeking is defined as the *repeated* seeking of safety-related information, even though a person has received the information before. If it’s true that people tend to be able to predict what others will say, and that reassurance-seeking is asking again for information that’s already been given, then it can be hypothesized that people may not actually be looking for information when they seek reassurance, since they already have the information they seem to be asking for. Instead of information, when people seek reassurance it may be because they are having trouble managing their anxiety or distress on their own. Thus, instead of information, they may actually be looking for their significant others to provide social support in dealing with the anxiety or distress that’s causing them to seek reassurance in the first place. In this context, “social support” includes statements or gestures to express empathy for the person’s distress or to offer emotional encouragement for the person to cope with the anxiety or distress, without actually addressing the content of the person’s request for reassurance. It would be important that significant others provide support rather than reassurance, because support is thought to help them learn to better manage distress over time, which in turn can lead the person to learn new information about their ability to handle distress or about the dangerousness of the feared situation.

The intervention would entail your significant others providing you with support rather than reassurance whenever you ask for reassurance. You and the therapist together would discuss what to say to your significant others about how social support can help you learn to manage anxiety/distress better, and come up with one or more phrases that your significant other(s) would say in place of providing reassurance. For instance, if a person asked whether the kitchen counter was truly clean, the person’s spouse could respond by saying, “I can tell this is a stressful situation for you, but I believe that you can tolerate this anxiety”. This intervention aimed at providing social support to help people tolerate distress or anxiety would help them address the difficulties that are causing them to seek reassurance in the first place, which in turn would lead to a decrease in how often they seek reassurance. The focus is on testing the beliefs underlying the reassurance seeking, rather than on the behaviour itself.

To summarize, in this intervention you will ask your significant others to provide support to help you learn to manage anxiety/distress directly, rather than to provide reassurance when you seek it.

1. **Traditional accommodation reduction intervention for participants**

Although it will be challenging to confront situations that make you fearful or anxious without receiving reassurance, you will find that doing so will help you learn new information about your anxiety and about how necessary it is to seek reassurance. Fear and anxiety are uncomfortable sensations, so people may engage in strategies in order to make themselves feel more comfortable or safe.

Reassurance is one way to take away doubt or anxiety in the moment. Because it tends to be a successful way to reduce anxiety, reassurance-seeking becomes a reinforced behaviour, meaning that it becomes more likely that you will use reassurance as a solution again in the future when you feel doubt or anxiety. The problem, though, is that there are lots of things in the world that *can* make a person anxious or doubtful, depending in part on the beliefs they hold about themselves and the world, so the anxiety almost always comes back again. Theory suggests that the problem with receiving reassurance is that it does not help a person learn to differentiate situations that are realistically dangerous or threatening from those that are not, nor does it help the person learn to manage anxiety on their own. So, in the short-term, receiving reassurance can work to lessen anxiety or doubt, but over the long run, it may actually maintain the anxiety problem.

The intervention would therefore entail your significant others not providing you with reassurance when you ask for it. You and the therapist together would discuss what to say to your significant others about why it is important to not receive reassurance anymore. You and your therapist would also come up with a plan for your significant others to either ignore requests for reassurance, or to use a neutral phrase that you and your therapist would come up with in advance instead of providing reassurance. For instance, if a person asked whether the kitchen counter was truly clean, the person’s spouse could either ignore the request or respond by saying, “That is reassurance-seeking”. This intervention aimed at reducing how often your significant others accommodate or “give in” to your requests for reassurance helps individuals learn that the compensation strategies they are using to manage anxiety are not necessary in order to tolerate the situation. The focus is on eliminating the behaviour of reassurance-seeking.

To summarize, in this intervention you will ask your significant others to stop providing you with reassurance when you seek it.

1. **Support intervention for partners**

Although it will be challenging for your family member or friend to confront situations that make him/her fearful or anxious without receiving reassurance, you will find that doing so will help him/her learn new information about anxiety and about whether it is necessary to seek reassurance.

People who seek reassurance tend to be able to predict in advance, quite accurately, how another person will respond, but still feel compelled to seek reassurance anyway. Reassurance-seeking is defined as the repeated seeking of safety-related information, even though a person has received the information before. If it’s true that people tend to be able to predict what others will say, and that reassurance-seeking is asking again for information that’s already been given, then it can be hypothesized that people may not actually be looking for information when they seek reassurance, since they already have the information they seem to be asking for. Instead of information, when people seek reassurance it may be because they are having trouble managing their anxiety or distress on their own. Thus, instead of information, they may actually be looking for their significant others to provide social support in dealing with the anxiety or distress that’s causing them to seek reassurance in the first place. In this context, “social support” includes statements or gestures to express empathy for the person’s distress or to offer emotional encouragement to manage the anxiety or distress, without actually addressing the content of the person’s request for reassurance. It would be important that significant others provide support rather than reassurance, because support is thought to help them learn to better manage distress over time, which in turn can lead the person to learn new information about their ability to handle distress or about the dangerousness of the feared situation.

The intervention would entail you providing your family member or friend with support rather than reassurance whenever s/he asks for reassurance. S/he and the therapist together would discuss what to tell you about his/her reassurance seeking, and come up with one or more phrases that s/he would like for you to say in place of providing reassurance. For instance, if a person asked whether the kitchen counter was truly clean, the person’s spouse could respond by saying, “I can tell this is a stressful situation for you, but I believe that you can tolerate this anxiety”. This intervention aimed at providing social support to help people tolerate distress or anxiety would help them address the difficulties that are causing them to seek reassurance in the first place, which in turn would lead to a decrease in how often they seek reassurance. The focus is on testing the beliefs underlying the reassurance seeking, rather than on the behaviour itself.

To summarize, in this intervention you would be asked to provide your family member or friend with support to help him/her learn to manage anxiety/distress directly, rather than to provide reassurance when s/he seeks it.

1. **Traditional accommodation reduction intervention for partners**

Although it will be challenging for your family member or friend to confront situations that make him/her fearful or anxious without receiving reassurance, you will find that doing so will help him/her learn new information about anxiety and about whether it is necessary to seek reassurance.

Fear and anxiety are uncomfortable sensations, so people may engage in strategies in order to make themselves feel more comfortable or safe. Reassurance is one way to take away doubt or anxiety in the moment. Because it tends to be a successful way to reduce anxiety, reassurance-seeking becomes a reinforced behaviour, meaning that it becomes more likely that a person will use reassurance as a solution again in the future when s/he feels doubt or anxiety. The problem, though, is that there are lots of things in the world that can make a person anxious or doubtful, depending in part on the beliefs they hold about themselves and the world, so the anxiety almost always comes back again. Theory suggests that the problem with receiving reassurance is that it does not help a person learn to differentiate situations that are realistically dangerous or threatening from those that are not, nor does it help the person learn to manage anxiety on their own. So, in the short-term, receiving reassurance can work to lessen anxiety or doubt, but over the long run, it may actually maintain the anxiety problem.

The intervention would therefore entail you not providing your family member or friend with reassurance when s/he asks for it. S/he and the therapist together would discuss what to say to you about why it is important to not receive reassurance anymore. S/he and the therapist would also come up with a plan for you to either ignore requests for reassurance, or to use a neutral phrase that s/he and the therapist would come up with in advance instead of providing reassurance. For instance, if a person asked whether the kitchen counter was truly clean, the person’s spouse could either ignore the request or respond by saying, “That is reassurance-seeking”. This intervention aimed at reducing how often you accommodate or “give in” to your family member or friend’s requests for reassurance helps individuals learn that the compensation strategies they are using to manage anxiety are not necessary in order to tolerate the situation. The focus is on eliminating the behaviour of reassurance-seeking.

To summarize, in this intervention you will be asked to not provide reassurance when your family member or friend asks for it, and instead either ignore requests or use a pre-selected neutral phrase.