

Obsessive-Compulsive Disorder: Symptoms and Treatment

Family, Youth, and Caregiver Guide

Obsessive-compulsive disorder, commonly abbreviated as OCD, is an anxiety-related mental health disorder characterized by unwanted, intrusive thoughts and repetitive, ritual-like behaviors. These intrusive thoughts and repetitive behaviors are called “obsessions” and “compulsions”, respectively, which is how the disorder gets its name.

Most people experience distressing thoughts and feelings of anxiety from time to time. However, individuals who have OCD tend to feel anxious much more frequently and for reasons that seem unnecessary or excessive to others. Obsessive thoughts and compulsive behaviors can occupy several hours of a person’s day, and they may significantly interfere with normal functioning.

OCD is slightly less common than some other mental health disorders, occurring in about 1 in 200 children and teens. It typically develops between the ages of 8 and 12 or during late adolescence/early adulthood. Boys and girls have approximately the same likelihood of developing the disorder, with no major differences observed across genders.

Symptoms

As mentioned above, obsessive-compulsive disorder is characterized by intrusive thoughts called obsessions and ritualized behaviors called compulsions. A person’s obsessions create feelings of anxiety or discomfort, and their compulsions serve to temporarily alleviate these negative feelings.

The exact obsessions and compulsions experienced vary from person to person. However, they often fall into one or more general categories.

► **Common Obsessions**

- Fear of germs, dirt, illness, bodily fluids, pollutants, or other sources of perceived contamination

- Excessive concern with items being arranged in a specific way, such as symmetrically or at right angles
- Excessive concern with actions being performed in a certain way or in a certain order
- Fear of being responsible for something terrible happening, especially due to personal negligence
- Fear of making mistakes
- Fear of not having a certain item when it is needed or of losing or forgetting important information
- Fear of acting on violent impulses to harm oneself or others
- Fear of acting on sexual impulses or engaging in inappropriate sexual behavior
- Fear of offending God or excessive concern with morality
- Excessive concern over one's sexual orientation or gender identity

► **Common Compulsions**

- Excessive cleaning, bathing, handwashing, or grooming
- Excessive arrangement and ordering of items in a very precise way
- “Checking” behaviors, such as checking that no one was harmed, that nothing terrible happened, or that a mistake was not made
- Mentally reviewing past events or behaviors to make sure they were done correctly or that no one was harmed
- Repeating routine activities and bodily movements for no apparent reason, or habitually performing certain actions multiple times in a row
- Counting and re-counting objects or actions
- Avoiding situations that might trigger obsessive thoughts

As you can see, many obsessions and compulsions revolve around fears and anxieties that may be reasonable in moderation. However, a person with OCD becomes excessively preoccupied with these fears, to the extent that they interfere with activities like going to school, spending time with friends, or engaging in hobbies.

Treatments

Obsessive-compulsive disorder can be challenging to live with, but it is treatable, and many children who are diagnosed with OCD go on to live full, normal lives. They just need a little help learning to manage and cope with their disorder.

OCD and other mental health disorders tend to be highly intertwined with a child's personal relationships. As such, it is imperative for caregivers and family members to be involved in and supportive of their child's treatment. If their relationships and home/school environments do not change to support their treatment, then its efficacy will be greatly reduced.

► Therapy and Skills Training

Professional therapy and counseling are important components of treatment for OCD. Treatments like individual therapy, family therapy, and skills training can help children and their families learn how to manage symptoms of OCD.

Some common therapeutic practices include:

- Teaching you and your child about OCD and what it means.
- Talking about and helping your child understand the obsessive thoughts that cause their anxiety. When talking about these thoughts, the therapist may be able to change them and help your child think differently.
- Encouraging your child to challenge their obsessive thoughts in order to feel less controlled by them.
- Slowly exposing your child to their fears and to the objects or situations that make them feel anxious, and teaching them how to avoid engaging in compulsive behaviors. This is a practice known as Exposure and Response Prevention (ERP).
- Guiding your child through relaxation, meditation, and deep breathing techniques, and teaching your child how to perform these techniques on their own.
- Looking at the activities your child is involved in and working on ways for your child to participate in them while enjoying themselves.

► Medication

Psychiatric medications may be used in combination with therapy to help your child manage their OCD symptoms.

Specific types of antidepressants called serotonin reuptake inhibitors (SRIs) and selective serotonin reuptake inhibitors (SSRIs) are commonly used to treat OCD. They are generally effective and have few side effects, although they do not provide immediate relief. Antipsychotic medications have also been shown to help some people who do not experience a reduction of symptoms with antidepressants.

People who benefit from medication typically see a 40–60% reduction in their OCD symptoms. However, it may be necessary to try several different medications or a combination of medications to find a prescription that works for your child. In any case, you should speak with your clinician or psychiatrist about the potential benefits and possible negative side effects before starting your child on any medication regimen.

Supporting a Child with OCD

Parents, caregivers, and other family members play an important role in supporting children diagnosed with obsessive-compulsive disorder. The younger the child, the more likely they'll

need help learning how to manage their symptoms. Family members can be instrumental in modeling and guiding new coping behaviors.

The following section includes tips that can be helpful for supporting your child's progress. Keep in mind they might not all be right for you and your family, but it could be useful to give them a try.

Educate yourself

Stay educated on what obsessive-compulsive disorder is, how it affects children, and how it affects your child in particular. Help your child understand what OCD is and what the treatment process will be like.

Get involved in therapy

Actively participate with the clinician in your child's treatment plan, and assist your child with taking any medications at home. Be open and flexible about meeting for treatment. Make time for both you and your child to participate individually and as a family.

Stay involved with school

Obsessive-compulsive disorder may negatively affect your child's progress in school. If you inform the necessary school staff about your child's struggle with OCD, they can make accommodations and help support your child when you are not around.

Create a positive home environment

Make sure that your home is a safe place for your child and the rest of your family. Have meals together, take walks as a family, and spend plenty of positive time together. OCD in children can cause extra stress on the family, so it is important to de-stress.

Create support systems

Make sure everyone who lives in your home is informed about what is going on in order to create a strong family support for your child. Find people you can trust and confide in to help you with transportation to appointments, taking care of family members, and emotional support.

Develop structures

Changes in routine are inevitable if your child begins treatment of any kind. Do your best to stay organized with appointments, medication, work, and social plans with friends and family. Creating structure for your child will help them stay on track with a daily routine.

Practice coping skills

There are a variety of coping skills you can practice with your child to help them manage their symptoms.

Examples include mindfulness, meditation, and deep breathing. Moving the body can also help to quiet obsessive thoughts.

Be patient

Learning to cope with OCD takes time. Don't rush your child, and be supportive of their treatment. Never pressure your child to stop their compulsive behaviors. Clinicians have a certain way of working with your child on exposure and response prevention.

Don't enable

Supporting your child is not the same thing as enabling their behavior. Do not help your child perform their compulsions or engage in their rituals to ease their anxiety. This will send the wrong message and make it harder for them to change their behaviors.

Don't place blame

Blaming yourself, your child, or anyone else will not help the situation. Be supportive in any way possible and don't feel guilty about what your child is going through. Don't punish anyone if they make mistakes or if you don't see progress being made.

Take care of yourself

Know your limits and seek support if you need it. Join support groups and seek professional guidance if you think it would be helpful. You are your child's source of support and comfort, so feeling your best will help your child feel their best!

Be proud of yourself

This is a difficult time. You are already on the right path just by staying informed and involved in your child's life.

References

► Centers for Disease Control and Prevention. (2023, July 26). *Obsessive-Compulsive Disorder in Children*. Retrieved November 2023.

<https://www.cdc.gov/childrensmentalhealth/ocd.html>

► Family Caregiver Alliance. (n.d.) *Taking Care of YOU: Self-Care for Family Caregivers*. Retrieved November 2023.

<https://www.caregiver.org/resource/taking-care-you-self-care-family-caregivers/>

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- ▶ International OCD Foundation. (n.d.) *About OCD*. Retrieved November 2023.
<https://iocdf.org/about-ocd/>
 - ▶ International OCD Foundation. (n.d.) *How Is OCD Treated?* Retrieved November 2023.
<https://iocdf.org/about-ocd/treatment/>
 - ▶ International OCD Foundation. (n.d.) *Medications for OCD*. Retrieved November 2023.
<https://iocdf.org/about-ocd/treatment/meds/>
 - ▶ International OCD Foundation. (n.d.) *Who Gets OCD?* Retrieved November 2023.
<https://iocdf.org/about-ocd/who-gets-ocd/>
 - ▶ National Alliance on Mental Illness (n.d.) *Obsessive-Compulsive Disorder*. Retrieved November 2023.
<https://www.nami.org/About-Mental-Illness/Mental-Health-Conditions/Obsessive-compulsive-Disorder/Overview>
 - ▶ National Institute of Mental Health. (2022, September) *Obsessive-Compulsive Disorder*. Retrieved November 2023.
<https://www.nimh.nih.gov/health/topics/obsessive-compulsive-disorder-ocd>
 - ▶ Smith, M., Robinson, L., & Segal, J. (2023, March 1). *Obsessive-Compulsive Disorder (OCD)*. HelpGuide.org. Retrieved November 2023.
<https://www.helpguide.org/articles/anxiety/obsessive-compulsive-disorder-ocd.htm>