

The following material is adapted from *Worried No More: Help and Hope for Anxious Children* and *What to do when your Child has Obsessive-Compulsive Disorder: Strategies and Solutions* by Aureen P. Wagner, Ph.D. This excerpt is available free of charge to parents, school personnel and health care professionals. This excerpt may be reproduced and distributed as long as it is in its entirety, and Dr. Aureen Wagner is given credit for the material. This excerpt may not be adapted or modified without specific permission from Dr. Aureen Wagner.

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Obsessive-Compulsive Disorder

Do you or a loved one have bizarre uncontrollable worries or fears and strange, senseless habits? Do you feel helpless and frustrated as you struggle to understand what is happening to you? These are not merely quirks or bad habits. You lose control of your mind as you are consumed by urges to complete senseless rituals to appease bizarre fears.

Over one million children and several million adults suffer from *Obsessive-Compulsive Disorder* (OCD), a beguiling disease of the mind. OCD consists of repeated obsessions and compulsions that are distressing and interfere with day-to-day functioning. *Obsessions* are senseless, unwanted and upsetting thoughts, images or urges that are unrelenting, uncontrollable and unstoppable. They can be bizarre, frightening and disturbing. Children often describe obsessions as “worries” or uncomfortable feelings that things are “not right.” *Compulsions*, also known as rituals, are deliberate physical or mental actions that are geared toward relieving the worry and discomfort created by the obsessions. They appear to be senseless habits that are excessive and unreasonable, but are repeated in a rigid and fixed manner. They are far from pleasant, but the person feels driven to repeat them because they relieve anxiety.

Signs and symptoms of Obsessive Compulsive Disorder

- Obsessions—relentless, uncontrollable, senseless thoughts
- Compulsions—repeated, excessive actions to relieve anxiety
- Consuming an hour or more each day
- Interference with day-to-day activities
- Distressing to the sufferer

OCD stands out as a relatively distinct anxiety disorder because obsessions are usually not simply worries about real-life problems. They are often bizarre in content; even when focused on day-to-day issues, OCD worries can reach complex proportions. Children and

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adults who suffer from OCD are often so embarrassed and ashamed of their fears and rituals that they hide them rather than seek help.

Fears of germs, contamination, harm and danger are common childhood obsessions. For example, children may have morbid fears of contracting AIDS or hepatitis from passing by strangers. Strong urges or needs for symmetry, precision and closure (also known as “just right” urges) are also common obsessions, more so among young boys. Children with just right urges may feel intensely uncomfortable and unable to proceed with an activity or action until they achieve a sense of closure. Other obsessive urges include the need to tell, confess, ask, or know things with certainty. Moral dilemmas, religious preoccupations, sexual and forbidden thoughts may plague older children and adolescents with OCD.

Among childhood compulsions, washing and grooming rituals predominate. Other common rituals include repeating, retracing or redoing actions, touching, tapping, checking, counting, or ordering and arranging things until they feel “just right.” Confessing, apologizing, praying, hoarding and seeking repeated reassurance are also common rituals. A child with OCD may spend hours bathing, washing hands, touching objects, arranging or checking things repeatedly. He may develop elaborate rules and sequences for routine activities such as eating, cleaning or doing laundry, and insist that family members comply with the rules as well. Often, children with OCD cannot articulate their fears or the reasons for their rituals.

Normal versus OCD Behaviors Checklist

Check the box on the right of each statement if your answer is Yes. <i>If you answered “Yes” to any items on the right, please seek an evaluation for your child.</i>			
Normal	The habit or fear is:		OCD
1. Commonly seen or typical	<input type="checkbox"/>	Bizarre or unusual	<input type="checkbox"/>
2. At a nuisance level	<input type="checkbox"/>	Extreme or exaggerated	<input type="checkbox"/>
3. Pleasing, satisfying, relaxing, soothing or enjoyable for your child	<input type="checkbox"/>	Upsetting, tormenting or bothersome to your child	<input type="checkbox"/>
4. Not detrimental, and may even help with normal activities	<input type="checkbox"/>	Gets in the way of normal activities	<input type="checkbox"/>
5. One that your child feels he <i>chooses</i> to do	<input type="checkbox"/>	One that your child would rather not do, but feels <i>forced</i> to do	<input type="checkbox"/>
6. One that your child could easily stop if he chose to	<input type="checkbox"/>	One that your child feels he cannot stop even if he wanted to	<input type="checkbox"/>
7. Interrupted without difficulty	<input type="checkbox"/>	One that creates distress if interrupted	<input type="checkbox"/>

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Indications of OCD in school:

When OCD presents in classic ways such as excessive hand washing, it is relatively easy to detect. OCD is harder to recognize when it manifests in reading and writing difficulties, school refusal, habitual tardiness, repetitive movements, touching or counting inconsequential things. OCD can also generate sudden, unexplained distress and excessive reassurance seeking. More often than not, OCD is difficult to spot, especially in school, because rituals may be hidden. Surreptitious and unusual behaviors may be an attempt to hide or camouflage embarrassing rituals. Jason, a seemingly obnoxious 14-year-old, suffers from OCD. He is disruptive and disorganized because he attempts to disguise checking and touching rituals by clowning around and being “fidgety.”

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