

## Obsessive compulsive disorder - family and friends

Obsessive compulsive disorder (OCD) is characterised by recurring and unwanted thoughts, impulses and images (obsessions) and repetitive behavioural and mental rituals (compulsions). Common obsessions include fear of contamination from germs, dirt or poisons, or fear of harm from illness or an accident. Common compulsions include excessive handwashing or household cleaning and excessive checking of appliances, vehicles or buildings to ensure safety.

People with OCD are usually aware that their obsessions and compulsions are irrational and excessive, yet feel unable to control or resist them. This can lead to significant distress. OCD can take up many hours of a person's day and may severely affect work, study and family and social relationships. It can be difficult, demanding and exhausting to live with a person who has OCD. Family members and friends may become deeply involved in the person's rituals and may have to assume responsibility and care for many daily activities that the person with OCD is unable to undertake.

### Understanding OCD can help you cope

It is important to get a correct diagnosis and to accept that OCD is a recognised mental health problem. Understanding what it is all about is the first step towards effective treatment and recovery. It can also decrease feelings of confusion or distress and help to open up communication.

Common misconceptions include that OCD is caused by laziness, lack of willpower, bad parenting or trauma. Assumptions like these lead to blame and guilt. Many OCD behaviours that are irritating and demanding are actually symptoms of the condition. People with OCD feel they have little or no control over their behaviour and often feel frustrated and distressed about their need to act compulsively. When family members and friends are more informed about OCD, it is easier to be supportive and understanding.

There are many resources available that can help resolve misunderstandings and concerns about this disorder. These include books, videos and websites with information about specific aspects of OCD (such as hoarding, obsessional thinking and hyper-responsibility) and community resources such as telephone helplines and support groups.

### Offer support and understanding

It is important to communicate clearly that you understand the difference between the behavioural symptoms of OCD and the person: 'I know this is not you, this is your OCD'. This will help to diminish the person's feelings of guilt and low self-worth and reduce their levels of stress and anxiety. Other suggestions include:

- Encourage the person to talk about the disorder, so that you can learn how it affects them and how you can be more supportive. But don't engage in discussions about the logic of OCD – most people with OCD know their obsessions and compulsions are excessive and irrational.
- Encourage the person to seek professional help. OCD is generally not a condition that will go away without treatment. You can assist in locating an experienced therapist and offer to be involved in their treatment program. If the OCD has involved you or other family or friends extensively in rituals and avoidance behaviours, you will need to know the best ways to modify your involvement so that the treatment can be as effective as possible.
- Encourage discussion about OCD as a common and treatable anxiety condition that is nothing to be embarrassed or ashamed of. Support the person with OCD to share their experiences with family and friends – this will help to break the secrecy about the OCD.
- Acknowledge improvements, however small, and encourage the person to reward themselves for their progress.
- Try to be patient and maintain a non-judgemental attitude – this will support the person to focus their efforts on recovery rather than dealing with anger and resentment.

- If their motivation wanes and they consider stopping treatment, remind them of the gains they have made.

### **Don't reinforce the obsessive compulsive behaviours**

Families and friends often get involved in OCD behaviours. It may seem like the only way to reduce the distress that the person with OCD is experiencing. You may feel that it is easier to keep things functioning if you can quickly comply with their request, rather than dealing with the protracted anxiety, tears or arguments that may arise if you don't do what is asked. Helping a person with OCD with their rituals, responding to requests for reassurance or undertaking tasks that they want to avoid are all behaviour patterns that maintain OCD and may create an obstacle to the person's recovery.

It can be very difficult to reduce this type of involvement in a person's OCD, especially if it has been going on for a long time. It is important to 'normalise' family or household routines and refuse to participate in reinforcing OCD behaviours. This should be done in a gradual way and, preferably, as part of a cognitive behavioural treatment program. Suddenly stopping all involvement could trigger overwhelming distress for the person with OCD and lead to increased symptoms, high agitation, anxiety and depression.

Some suggestions include:

- Talk openly about behaviours that impact on household routines and time. Plan ways in which family and friends can gradually reduce their participation in the person's rituals and explain the reasons for doing this. Encourage the person with OCD to be a part of decision making about how this is achieved. Set realistic goals together and talk about ways to ensure that everyone will abide by the plan.
- If the person with OCD is in treatment, offer to attend a session with them so that you can seek advice about how you can best support their treatment program.
- Try to maintain normal household routines whenever possible.
- Focus on strengthening family and social connections and reinforce a sense of stability by maintaining positive traditions and occasions – celebrate birthdays and anniversaries, have regular family dinners. Reinforce positive communication and behaviours (such as sharing, hugs and helping each other) and keep up family activities such as going to church or to the footy, taking the dog to the park and so on.

### **Reach out for support and help for yourself**

If you live with someone with OCD, it is likely you will need some support and help for yourself. Over time, OCD in the family or household can lead to everyone feeling isolated and alone. It is important to maintain your connections and supports among your extended family and friends. If these support networks are limited or unable to meet your needs, consider seeking out supports in the community. Suggestions include:

- Contact a telephone helpline for families and carers of people with OCD and anxiety conditions.
- Attend a support group for families and friends in similar situations.
- Attend education and skills groups for carers of people with OCD.
- Seek out information or workshops on stress management, relaxation and meditation, and healthy living.
- If your physical or emotional health is suffering, seek professional help for yourself – short-term counselling and support can be found through your GP, local community health centre or a private psychologist.
- Take time out for yourself whenever possible and try to maintain hobbies and outside interests.

### **When the person who has OCD refuses treatment**

A person who has OCD may be reluctant to seek professional help. They may be frightened by the stigma associated with mental illness or worried that they might be found to be really 'mad' or 'crazy'. They may be afraid of having to give up their compulsions – they may feel that the behaviours are necessary to their survival and that it would be impossible to stop them. They may fear becoming addicted to medications, 'failing' at the therapy or showing themselves to be weak because they can't deal with their problem on their own.

Suggestions for supporting the person with OCD include:

- Offer reassurance that OCD is a recognised and treatable illness.

- Assist them to be fully informed about effective treatments, including medication and psychological therapy. Information about available options – how the treatments work, what is expected of the patient/client, how long it should take, what self-management strategies can improve recovery, how these treatments have helped others with OCD – can help alleviate many of the fears that people with OCD have about treatment.
- Encourage them to seek treatment from a professional who is experienced in treating OCD using evidence-based approaches. Fears and worries about treatment may be exacerbated if the person with OCD is exposed to an incompetent or inappropriate treatment service.
- Don't try to bully or ridicule a person with OCD into getting treatment – strong-arm tactics won't work and will only increase their feelings of powerlessness and failure.
- Stress that knowing when to seek help is actually a sign of strength, not weakness.
- Seek advice from professionals and support groups on your own, if necessary.
- Sometimes, despite your best efforts, you have to accept there's nothing more you can do to encourage the person to seek help – in this case, you need to find avenues of support and strength for yourself.
- If you think the person is in danger of harming themselves or someone else, call your doctor, your local mental health service crisis assessment team or the police.

### **Where to get help**

- Your doctor
- Anxiety Recovery Centre Victoria Tel. (03) 9886 9377
- SANE Australia Tel. 1800 18 SANE (7263), Monday to Friday 9.00am to 5.00pm

### **Things to remember**

- Be informed. Accepting that OCD is a recognised and treatable mental health condition and understanding what it is all about are the first steps towards recovery.
- Helping a person with their compulsive behaviours can reinforce their symptoms; however, it is important that the involvement of friends and family in rituals is reduced in a very gradual way, as part of an agreed plan with the person or treatment program.
- Encourage the person to seek help from a professional experienced in treating OCD using evidence-based approaches.

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Anxiety Recovery Centre Victoria

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