

HOW CAN I HELP A LOVED ONE?

Supporting a loved one who experiences OCD can be challenging. Many people feel like they have to follow along with a loved one's compulsions. Some people who experience OCD avoid certain things or activities, and other people may feel like they have to do everyday things for a loved one.

You may have many different complicated feelings. You may feel upset when a loved one is experiencing distressing symptoms of OCD, but you may not see why a normal task could be a problem. You may want a loved one to be more independent, but see how challenging certain things can seem. If a loved one's experience with OCD affects others, especially young people, it's a good idea to seek counselling for everyone. Family counselling is a good option for the entire family. Here are more tips to help you support someone you love:

- A loved one who experiences OCD usually understands that their experiences don't make sense. Trying to argue with obsessions or compulsions doesn't help anyone.
- Avoid 'helping' behaviours around OCD—for example, helping a loved one avoid things that cause anxiety. This can make it harder to practice healthy coping skills in the long run. Instead, it may be more helpful to focus on the feelings behind the behaviours.
- Signs of OCD can be more difficult to manage during times of stress—and even happy occasions can be stressful. Recognize that a loved one may need extra supports, and try to plan ahead.
- Every small step towards managing OCD behaviour can take a lot of courage and hard work, so celebrate every victory.
- Set your own boundaries, and seek extra support when you need it. Support groups for loved ones can be very helpful.

DO YOU NEED MORE HELP?

Contact a community organization like the Canadian Mental Health Association to learn more about support and resources in your area.

Founded in 1918, The Canadian Mental Health Association (CMHA) is a national charity that helps maintain and improve mental health for all Canadians. As the nation-wide leader and champion for mental health, CMHA helps people access the community resources they need to build resilience and support recovery from mental illness.

Visit the CMHA website at www.cmha.ca today.

OBSESSIVE- COMPULSIVE DISORDER



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Many of us have small habits that make us feel better, but we can also live without them. For example, we might think of something as ‘lucky’ or have a routine that feels comforting. But for people who experience obsessive-compulsive disorder (OCD), these behaviours are much more intense and disruptive and are fuelled by unwanted thoughts that don’t go away. Obsessive-compulsive disorder is not always easy to understand, but it’s a real illness that causes difficulties in a person’s life.

WHAT IS OCD?

Obsessive-compulsive disorder is a mental illness. It’s made up of two parts: obsessions and compulsions. People may experience obsessions, compulsions, or both, and they cause a lot of distress.

Obsessions are unwanted and repetitive thoughts, urges, or images that don’t go away. They cause a lot of anxiety. For example, someone might worry about making people they love sick by bringing in germs. Obsessions can focus on anything. These obsessive thoughts can be uncomfortable. Obsessions aren’t thoughts that a person would normally focus on, and they are not about a person’s character. They are symptoms of an illness.

Compulsions are actions meant to reduce anxiety caused by obsessions. Compulsions may be behaviours like washing, cleaning, or ordering things in a certain way. Other actions are not obvious to others. For example, some people may count things or repeat phrases in their mind. Some people describe it as feeling like they have to do something until it feels ‘right.’ It’s important to understand that compulsions are a way to cope with obsessions. Someone who experiences OCD may experience distress if they can’t complete the compulsion.

People who experience OCD usually know that obsessions and compulsions don’t make sense, but they still feel like they can’t control them. Obsessions and compulsions can also change over time.



WHO DOES IT AFFECT?

OCD can affect anyone. Researchers don’t know exactly what causes OCD, but there are likely many different factors involved, such as family history, biology, and life experiences.

WHAT CAN I DO ABOUT IT?

Obsessive-compulsive disorder can be very challenging and hard to explain to other people. You may feel embarrassed, ashamed, or guilty about your experiences. These feelings can make it hard to seek help. Because obsessions and compulsions take a lot of time, it can be hard to go about your daily life. Many people describe OCD as something that takes over their life, and this is not easy to deal with. But the good news is that OCD is treatable. It’s important to talk to a health professional.

Counselling and support

A type of therapy called cognitive-behavioural therapy (or ‘CBT’) is shown to be effective for helping people with OCD. It teaches you how your thoughts, feelings, and behaviours work together, and teaches skills like solving problems, managing stress, realistic thinking and relaxation. For OCD, therapy may also include a strategy called exposure and response prevention, which helps you learn new ways to look at obsessions and compulsions.

Support groups can also be very helpful. They are a good place to share your experiences, learn from others, and connect with people who understand what you’re going through. OCD can make people feel very isolated and alone, so support groups can be a good way to build a support network.

There are many self-help strategies to try at home. Small steps like eating well, exercising regularly, and practicing healthy sleep habits can really help. You can practice many CBT skills, like problem-solving and challenging anxious thoughts, on your own. Ask your support team about community organizations, websites, or books that teach CBT skills. And it’s always important to spend time on activities you enjoy and connect with loved ones.

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Medication

Antidepressants are the most common medication for OCD. Antianxiety medications (benzodiazepines) may be less effective for OCD, so they are not usually the first option to try.