

# OBSESSIVE-COMPULSIVE DISORDER (OCD)



## About OCD

Obsessive-compulsive disorder (OCD) is a disorder that usually begins in adolescence or young adulthood. It is characterized by recurrent intense obsessions and/or compulsions that cause severe discomfort and interfere with day-to-day functioning. OCD has a genetic component and can run in families; however, that is not always the case. More research in brain science is being conducted to learn more.

Symptoms may be mild or severe and can change over time at certain developmental milestones and with hormonal changes. The content and intensity of obsessions and compulsions may be impacted by schedule changes, nutrition, exercise frequency, sickness, sleep quality and quantity, and solitude in home and school life. Overall, OCD interferes with a child's normal routine, academic functioning, social activities, and/or relationships.

## What Does It Look Like?

**Obsessions** – repetitive, intrusive, unwanted thoughts, images, or urges.

### *Possible Categories of Obsessions*

- Irrational worry about dirt, germs, or contamination
- Excessive concern with order, arrangement, or symmetry
- Fear that negative or aggressive thoughts or impulses will cause personal harm or harm to a loved one
- Extreme concern with appearance of homework assignments
- Preoccupation with losing or throwing away objects with little or no value
- Excessive concern about accidentally or purposefully injuring another person
- Feeling overly responsible for the safety of others
- Distasteful religious and sexual thoughts or images
- Doubting that is irrational or excessive

**Compulsions** – repetitive behaviors or mental acts that the individual feels driven to perform.

***Common Categories of Compulsions***

- Cleaning – Repeatedly washing one’s hands, bathing, or cleaning household items, often for hours at a time
- Checking – Checking and re-checking several to hundreds of times a day that the doors are locked, the stove is turned off, the hairdryer is unplugged, etc.
- Repeating – Inability to stop repeating a name, phrase, or simple activity (such as going through a doorway over and over)
- Mental rituals – Endless reviewing of conversations, counting; repetitively calling up “good” thoughts to neutralize “bad” thoughts or obsessions; or excessive praying and using special words or phrases to neutralize obsessions

## Symptoms and Interventions

	Symptoms	Interventions
<b>Classroom</b>	<ul style="list-style-type: none"> <li>Needs to find the perfect way to say something</li> <li>Experiences challenges with writing (desire for perfection)</li> <li>Struggles to inform others of onset of symptoms</li> </ul>	<ul style="list-style-type: none"> <li>Extend time for tests or when participating during class discussion</li> <li>Provide a computer for student to compose documents on</li> <li>Establish a communication system</li> </ul>
<b>School Work</b>	<ul style="list-style-type: none"> <li>Experiences anxiety regarding test taking</li> <li>Wants to find the perfect answer; this can lead to difficulty completing assignments or tests</li> <li>Struggles with reading out loud</li> <li>Experiences difficulty completing and anxiety about assignments</li> </ul>	<ul style="list-style-type: none"> <li>Extend time on tests</li> <li>Provide an alternate place for taking tests</li> <li>Modify tests to include word banks or equation sheets</li> <li>Reduce the amount of work or set limits on the time to be spent on a task</li> <li>Refrain from calling on the student if it produces anxiety</li> <li>Be careful not to punish or criticize the student for behaviors related to OCD</li> </ul>
<b>Desk</b>	<ul style="list-style-type: none"> <li>Struggles with taking notes (concerns about writing or capturing all/relevant information)</li> <li>Experiences physical symptoms that student does not want others to see</li> </ul>	<ul style="list-style-type: none"> <li>Assign a peer buddy to assist the student</li> <li>Arrange the student's seating to minimize unwanted attention to challenges</li> </ul>
<b>Outside the Classroom</b>	<ul style="list-style-type: none"> <li>Experiences difficulty with reading</li> <li>Experiences peer rejection</li> </ul>	<ul style="list-style-type: none"> <li>Provide the student with audio books or materials</li> <li>Facilitate back-and-forth conversation/role-play on what OCD is and present symptoms so student can speak to his or her experience</li> <li>Facilitate peer groups at lunch, in the classroom, and in the community</li> </ul>
<b>Transitions</b>	<ul style="list-style-type: none"> <li>Struggles with sudden changes in routine</li> </ul>	<ul style="list-style-type: none"> <li>Provide student with notice of changes in routine verbally or visually on the daily schedule</li> <li>Provide smooth transitions and establish routines</li> </ul>

## Student Strengths

- Alert
- Bright
- Cooperative
- Detailed
- Diligent
- Knowledgeable

## Resources

- **American Academy of Child and Adolescent Psychiatry**  
[http://www.aacap.org/AACAP/Families\\_and\\_Youth/Facts\\_for\\_Families/FFF-Guide/Obsessive-Compulsive-Disorder-In-Children-And-Adolescents-060.aspx](http://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Obsessive-Compulsive-Disorder-In-Children-And-Adolescents-060.aspx)
- **National Institute of Mental Health**  
<http://www.nimh.nih.gov/health/topics/obsessive-compulsive-disorder-ocd/index.shtml>
- **Anxiety & Depression Association of America**  
<http://www.adaa.org/understanding-anxiety/obsessive-compulsive-disorder-ocd/symptoms>
- **Child Mind Institute**  
<http://www.childmind.org/en/posts/articles/2011-11-28-teachers-guide-helping-kids-ocd>