Back to School with OCD

By Allen Weg, EdD

As with many kids who struggle with psychiatric disorders, summer is often a time when kids with OCD experience less symptoms, since the pressures from school and the squeeze of extracurricular activities are not present. School is back, however, and so symptoms may re-emerge. Here's a review of what to look for and what to do about it.

The Basics:

What IS OCD? Obsessive Compulsive Disorder, or OCD, consists of mainly of two parts: intrusive thoughts, or "obsessions." These are worries that just seem to pop up into a person's head without any intention on the part of the person, and makes one very anxious and/or uncomfortable. Obsessions "happen to" people.

The second part of OCD is the "compulsions," also called, "rituals." The compulsion is something that the person thinks or does, or doesn't do and avoids, in order to control or reduce the anxiety produced by an obsession. The person "actively engages" in his or her compulsion to try to feel better.

How Common is it? While statistical reports vary somewhat, it is generally accepted that 1 in 200 children and adolescents have OCD. This means that nearly all schools have at least a few children with OCD in their student body at any given time, and larger schools and college campuses may have dozens, or even scores of students.

Types of OCD:

OCD can present as different symptom subsets. Using ice cream as a metaphor, we often refer to it as coming in different "flavors." Here is a review of a few types.

* Washing is perhaps the most commonly known, is the vanilla of OCD. Obsessions have to do with becoming contaminated or in some way dirty from sources such as bodily fluids or chemicals. In School: This may result in repeated trips to the bathroom to wash, or, conversely, a complete avoidance of the bathroom, because it is contaminated. Avoiding touching door handles, sitting at certain desks, the gym, or cafeteria are also common.
* **Cleaning** is related to washing, but the focus for the child with OCD is not so much one's body as a thing or a place (like a locker or desk). The place or thing needs to be avoided or thoroughly washed, often in a ritualistic way, before the person with OCD will willingly come in contact with it. **In School:** These symptom result in using anti-bacterial wipes on desks, lockers, computers, etc.

* **Checking** is looking to make sure that nothing has been left behind, that things are "ok" in some way, and may also be expressed in the form of repeated questions. **In School:** These symptoms result in repeated questions to the teacher, going back to a classroom to see if anything was left behind, and searching through the locker and bookbag repeatedly to make sure everything is in there.

* **Repeating** can refer to engaging in any behavior over and over again in order to ward off something bad from happening, or just until it "feels right." **In School:** These symptoms are often expressed in the need to retrace steps, walk through doorways repeatedly, getting up and sitting down repeatedly, or re-reading or re-writing assignments.

* **Need for symmetry or order** is the need for things to be even, or equally weighted. Often things have to be lined up a certain way, or "balanced." **In School:** Books or writing utensils have to be lined up in a specific way, much time is spent organizing one's locker or desk.

* **Sexual obsessions**, are most commonly a fear that one is really gay or a pedophile when in fact there has been no sexual arousal, sexual fantasies, or sexual behaviors that would support this is. Surprisingly, this is more common than one might think, and has been seen in kids as young as eight or nine years old. **In School:** Avoidance of gym, the locker room, or school in general.

* **Fear of loss of impulse control** involves the obsession that one will act out in some incontrollable way. Examples are: fear of hurting someone, of blurt out inappropriate statements or curse words in public, of jumping out of a window. Avoidance of potentially dangerous or embarrassing situations is usually the compulsive response. **In School:** Avoidance of the cafeteria where there are knives, of the science lab where there are dangerous chemicals, of holding pens or pencils, or walking near windows. Students will often be afraid to ask or answer questions in class, for fear they may blurt out something inappropriate.

* **Other Presentations** include **Health anxiety**, or what used to be termed Hypochondria that results in multiple trips to the nurse or school refusal altogether. **Emetophobia**, or fear of vomiting, a very common OCD presentation, results in avoidance of eating, entering the cafeteria, or school attendance. **Scrupulosity**, or moral/ethical OCD, may result in fears that one has cheated or plagiarized work. **Hoarding** is when the child finds it very difficult to throw just about anything away and results in overstuffed bookbags, desks, or lockers. **Perfectionism**, where standards are set so high that the student does schoolwork all the time, resulting in loss of sleep, avoidance of weekend activities, or school altogether because of the stress.

**Here are some common warning signs that your child may be struggling with OCD**

School avoidance
Dry, chapped, cracked, bleeding hands

Excessive requests for the bathroom

Refusal to bring school books home

Repeated questions about assignments

Repetitive activities of many types

Checking book bag/ordering and re-ordering papers, desktop items

Multiple erasures/late or incomplete assignments

Excessive time organizing one's desk, locker, or book bag

Excessive time on tests

Multiple trips to nurse/concerns about illness

Avoiding bathroom, cafeteria, gym, art/woodwork class, or a particular person

Stuffed locker or desk

**Treatment:**

Treatment should be done by an appropriately trained professional, and, especially with younger kids, very much depends on parental involvement. OCD treatment is very specialized, so make sure to "vet" your therapist appropriately. Sources include The New Jersey Psychological Association referral program, the International OCD Foundation web site (that includes a state-by-state listing of trained professionals) at www.IOCDF.org, and its local affiliate, OCD New Jersey, at www.OCDNJ.org that also offers regular presentations on OCD that are open and free to the public.

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