

WHAT IS OCD?

OCD is an anxiety disorder characterised by unpleasant and recurring thoughts, images. doubts or urges (called obsessions) and repetitive and irrational behaviours (called compulsions). Compulsions, also known as rituals, may be observable behaviours (such as washing or tapping) or mental rituals (such as thinking a good thought to cancel out a bad thought). Compulsions are usually carried out as a way of reducing the distress caused by obsessions. OCD takes many different forms and can range from mild to severe. When children are troubled by OCD they can experience very high levels of anxiety and distress and find that it can take up a lot of their time.

Some common obsessions are:

- Fears about dirt or contamination
- Worries about harm coming to yourself or others
- Unwanted sexual thoughts
- Thoughts about doing something forbidden or embarrassing
- Discomfort if things are not symmetrical or even
- Needing to tell, ask or confess
- Fears of losing important things

Some common compulsions are:

- Checking things over and over again
- Touching or tapping things
- Seeking reassurance
- Hoarding or collecting things that are useless
- Arranging things so that they are 'just right'
- Washing and cleaning
- Counting, repeating and re-doing things

The good news is that OCD can be successfully treated and recent evidence shows that the sooner it is tackled the better the treatment outcomes are likely to be. The recommended treatment for OCD by the Department of Health is a talking therapy called Cognitive Behaviour Therapy (CBT). It is also recognised that some children may also benefit from treatment with medication called selective serotonin re-uptake inhibitors (or SSRIs). It is clear therefore that

young people should not have to struggle with OCD without any support. OCD Action wants young people, their parents and their school to take action now.

WHY DOES MY CHILD HAVE OCD?

Sadly, some parents may blame themselves for their child's OCD or wonder what they did wrong; your child having OCD does not mean that you have been poor parents.

Scientists believe that a combination of physiological and environmental factors lies behind OCD, but there is no direct known answer as to why some people develop OCD whilst others do not. Ultimately it makes more sense to focus on how you can help your child recover from their OCD and how you can support them on their journey to a better life.

HOW DOES OCD AFFECT MY CHILD AT SCHOOL?

OCD can affect many areas of a young person's life, including school life. It is important to remember that OCD affects people in many ways, however. Below are some possible ways it may present in school:

- Poor attention and concentration due to intrusive thoughts or the need to perform rituals
- Extreme tiredness due to being up late at night doing rituals or the overall exhaustion caused by the constant battle with OCD
- Frequent or prolonged toilet visits due to completing cleaning rituals
- An inability to touch objects, materials or other people due to possible contamination fears
- Excessive questioning and need for reassurance
- Messy work due to having to repeat rituals such as rewriting or erasing words
- Repeated lateness as a result of being delayed by rituals
- Late handing in work due to being slowed down by obsessions and/or compulsions
- Arranging items on a desk, shelf or classroom so that objects are aligned
- Repetitive behaviours such as getting up and down from a desk or opening and closing the door
- Difficulties making decisions

- Low self esteem and difficulty with peer relationships
- Reduction in grades or decline in school performance

It may also be helpful to be aware that OCD is commonly associated with other disorders such as Attention Deficit Disorder (ADD), Attention Deficit Hyperactivity Disorder (ADHD), Autism Spectrum Disorders (ASDs) and Tourette Syndrome.

SHOULD I TELL MY CHILD'S SCHOOL?

Telling your child's school about the problems that they are facing can be beneficial. The school has a responsibility to support your child but can only do this if they are fully aware about the difficulties they are experiencing.

Ultimately, however, it is important that your child feels involved in making the decision whether or not to tell the school and they may have some concerns about this. You will need to talk through these concerns with them.

Once OCD treatment begins, it can be helpful for the child's teacher to liaise regularly with the Child and Adolescent Mental Health Service (CAMHS). This liaison can facilitate a greater understanding of how the child's symptoms are presenting in school and also provide an opportunity to identify, implement and monitor potentially helpful strategies.

Regardless of the age of your child, it might be useful to provide the school with some information about OCD.

WHAT CAN SCHOOL STAFF DO TO HELP?

Because children and young people spend many hours of the day in school, it is essential that teachers and other school personnel seek the advice of the school SENCO (Special Educational Needs Co-ordinator) to find the best methods of working with your child in the classroom. Each child is different and they will need to ensure that you and your child work with them to agree on a plan of action.

Below we have listed some advice and tips for helping young people who have OCD in the classroom setting:

Effective communication between home and



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There's more about OCD on the website www.ocdaction.ora.uk/school

school is important—in the case of a young child with OCD, a 'concerns book' or an OCD diary or monitoring form (see Appendix 1) may be exchanged between parents and teachers so the child's progress may be tracked and shared.

- A challenge for teachers is finding the balance between helping the child 'face their fears' whilst at the same time not becoming overwhelmed.
- If the young person is having treatment, it is often helpful for the therapist to be in regular contact with teaching staff providing the young person and their family are happy with this.
- It is important that teaching staff do not become impatient with the young person or punish them for behaviour over which they have no control. At the same time it is important that children with OCD are helped to learn good behaviour and to obey rules in the same way as any child.
- If the young person becomes highly anxious in the classroom as a result of their OCD, it may be helpful for teaching staff to recognise this. Depending on what stage they are at in their treatment, options for teachers are to help them 'sit out' their anxiety, discuss it, or take a very short planned break.
- If the young person is struggling to meet deadlines on account of their OCD, teachers could consider extending the deadline. It may also be helpful to discuss the amount of time

- the young person is taking to complete assignments to ensure that it is not excessive. Detailed structuring of homework timetables can help.
- Teachers could consider decreasing school workload both in lesson time and homework assignments. However, many children with OCD have great potential so it is important that they are also supported in achieving their goals.
- Teaching staff could consider how the young person's OCD may impact on their performance in exams and what support they may find helpful during these times. The young person could be allowed extra time to complete the test, be provided with a different test-taking location, or even be allowed to take the test orally.
- Teachers should be aware that some subjects may be more difficult for the young person depending on their worries, e.g. Maths might be difficult for a young person with worries about numbers and Biology for those with a fear of germs. At the same time, it is important that children don't miss out on exciting opportunities because of OCD, so they should be helped to 'face their fears'.
- OCD can damage confidence and self-esteem. In school, young people should be supported to focus on their strengths and areas in which they are confident.
- Teaching staff should be alert to the fact that OCD sufferers may be easy targets for bullying because of compulsive behaviours or lack of self-esteem.
- It may also be helpful to conduct classroom discussions about what OCD is and educate peers about the disorder. Teachers should be sensitive to the young person's and parents' views on this.

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WHAT ELSE CAN I DO?

- One of the hardest aspects of having a child with OCD is trying not to reassure excessively. You will learn how to achieve the best balance for you and your child as you work with your child's therapist. You may want to share some of these tips with the school.
- Seeing your child suffering from OCD can be distressing and interfere with ordinary family life and time spent with your partner and other children. So it is important that you consider your own wellbeing and health whilst supporting your child.

We are looking for volunteers for the OCD at School project, especially parents of young people with OCD either currently in school or who have recently left. Can you help us raise awareness of OCD by getting our materials out there particularly in schools? Or do you think that you would be able to talk to groups about OCD in the class environment especially for secondary schools? - Please contact OCD Action to find out more, - Jeannette

WHERE ELSE CAN I FIND INFORMATION ABOUT OCD?

For more information on OCD and young people, refer to the

- OCD at School Guide for School Personnel
- OCD at School Guide for Young People
- www.ocdaction.org.uk/school





THIS LEAFLET IS PART OF OCD ACTION'S **OCD AT SCHOOL** PROJECT WRITTEN IN COLLABORATION WITH STAFF FROM THE NATIONAL AND SPECIALIST SERVICE FOR YOUNG PEOPLE WITH OCD, MAUDSLEY HOSPITAL, LONDON. THE PROJECT IS FUNDED BY THE CITY BRIDGE TRUST.