

OVERCOMING OBSESSIVE COMPULSIVE DISORDER

OCD and life as a whole worse for everyone in the long term or establishes a vicious circle. It's not your fault and most relatives know that accommodating is unhelpful. What is important is for you and the person with OCD to acknowledge that accommodation is part of the problem and to seek help. Can you identify the most common ways that you accommodated your person with OCD in the past week?

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Think about how often you have responded this way in the past week. How helpful was it in getting on with your own and your relative's day-to-day activities and why? How helpful would it be for them to get rid of their OCD in the long term?

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**1 b) Not accommodating the problem**

If accommodating the OCD has been a problem, then the following might be goals to aim towards. However, they need to be done with negotiation and discussion.

- (i) I will refuse to do things for my relative which I think don't need to be done
- (ii) I will refuse to obtain things for them that they think they need for the problem (e.g., unnecessary cleaning products, beauty products, toilet paper, or alcohol)
- (iii) I will not wait for them if they take too long (specify)
- (iv) I will carry on normally with my own routines despite the problem (e.g., going to work)
- (v) I will encourage them to engage in anti-OCD behaviours instead of their avoidance and compulsions in response to the problem
- (vi) I will try to spend relatively equal amounts of time with them and other family members
- (vii) I will encourage them to engage with people at times when they want to avoid them because of the problem
- (viii) I will encourage them to look after themselves (e.g., dressing, eating, walking, etc.) instead of doing things for them

Can you identify the goals that you want to achieve by not accommodating your person with OCD?

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If you achieved these goals do you think it would be helpful towards getting on with your own and your relative's day-to-day activities and why?

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## 2a) Using logic and reassurance

This refers to talking to a person with OCD with logic and reassurance when they are anxious and have doubts. This seems to make sense but is adding fuel to the fire. You are responding to the *content* of the obsession. We will discuss how much more helpful it is to provide emotional support rather than reassurance or logic. You may, for example,

- (i) Repeatedly provide reassurance in response to the person's OCD to convince them that their fears are unfounded (e.g., that they had not just run over a cyclist)
- (ii) Use logical arguments or intellectual analysis to convince them that their fears are unfounded (e.g., whether the exposure to asbestos was dangerous)
- (iii) Get involved in the detail of what they said about their OCD

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- (iv) Try to persuade them that they are not in any danger
- (v) Try to tell them that there can never be 100 per cent certainty.

Can you identify the most common ways that you use logic and rationality with your person with OCD?

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Think about how often you have responded this way in the past week. How helpful was it in getting on with your own and your relative's day-to-day activities and why? How helpful was it to get rid of their OCD in the long term?

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**2b) Being emotionally supportive when they want certainty**

If being logical and reassuring has been a problem, then the following might be goals to aim towards. By being

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emotionally supportive, we mean being understanding and validating their distress but not engaging in the content of their worry (e.g., whether they are a paedophile or contaminated).

- (i) I will decline to repeatedly discuss the *content* of my relative's worries with them
- (ii) I will be understanding and emotionally supportive of my relative without trying to resolve their uncertainties through discussion
- (iii) I will be emotionally supportive without getting caught up trying to reassure my relative
- (iv) I will not reassure my relative or get drawn into repetitive discussions about their concerns
- (v) I will help my relative to tolerate the doubt and that 100 per cent certainty is not possible
- (vi) I will help my relative to recognise that they are getting caught up in the same problematic cycles – seeking certainty leads to increasing their doubt
- (vii) I will encourage them to engage in a different and more helpful activity when they began to engage in the problem

Can you identify the goals that you want to achieve for being emotionally supportive with your person with OCD when they want certainty?

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Think about how often you have responded this way in the past week. How helpful was it in getting on with your own and your relative's day-to-day activities and why? How helpful was it to get rid of their OCD in the long term?

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### **3a) Expressing excessive or unhelpful emotions**

Expressing emotion with the person with OCD refers to expressing your worry and irritation in ways that may not be helpful. For example,

- (i) Telling the person with OCD how worried you are about them
- (ii) Reacting towards them in an angry or irritated way because of the problem
- (iii) Being critical, aggressive, sarcastic, mocking or teasing with them about the problem
- (iv) Threatening to oppose a compulsion if they continue with their problem behaviour

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- (v) Showing your distress when you see the person with OCD is upset.

Can you identify the most common ways that you express emotion with your person with OCD?

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Can you think about how often you have responded this way in the past week. How helpful was it was in getting on with your own and your relative's day-to-day activities and why? How helpful was it to get rid of the OCD problem in the long term?

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### **3b) Being compassionate**

The following might be the goals for being compassionate towards your relative (instead of being excessively emotional).

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- (i) I will encourage them to keep working on overcoming the problem when they feel discouraged
- (ii) I will respond by being calm and gentle even when they feel distressed by the problem
- (iii) When my relative is distressed I will respond by soothing them with physical contact
- (iv) I will notice and respond encouragingly when they are doing well or show improvement
- (v) I will respond compassionately but firmly when my relative is upset
- (vi) I will help them to feel understood
- (vii) I will remind them of times when they coped well
- (viii) I will tolerate my relative's distress rather than reacting immediately once they become distressed

Can you identify the goals that you want to achieve to be compassionate to your person with OCD?

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If you followed these goals, would it be helpful in getting on with your own and your relative's day-to-day activities?

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#### **4a) Negative relationship**

This section refers to the quality of the time you have with the person with OCD and the risk of neglecting your relationship. Here are some examples

- (i) Spending significantly less quality time (i.e., enjoyable time together away from the problem) than you ought to
- (ii) Keeping away from the person with OCD as much as you can because of the problem (e.g., by working longer hours or living your own life)
- (iii) Stopping planning for the future because of the problem
- (iv) Frequently telling them how poor your relationship has become
- (v) Ignoring them because of the problem (e.g., leaving the room)
- (vi) Having no time to do enjoyable things for yourself because of their problem
- (vii) Not having enough physical contact with them (e.g., hugging children or intimacy with partners)

Can you identify the most common ways that your quality of relationship has an impact on your person with OCD?

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Think about how often you have responded this way in the past week. How helpful was it in getting on with your own or your relative's day-to-day activities and why? How helpful would it be to get rid of the OCD problem in the long term?

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#### **4b) Positive relationship**

If you have a negative relationship with the person with OCD, then these may be some of the goals to work towards.

- (i) I will spend quality time with them away from the problem
- (ii) I will express hope for their future
- (iii) I will treat them as an equal
- (iv) I will act towards them as a relative rather than a carer
- (v) I will notice and remind them of positive things in our relationship
- (vi) I will treat them with respect
- (vii) I will have fun with them

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Can you identify the goals that you both want to achieve to try to improve your relationship?

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How helpful do you think trying to achieve these goals would be in your day-to-day activities and why?

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### **5a) Avoiding triggering the OCD**

Avoiding triggers is a specific type of accommodation. Here are some examples:

- (i) Doing things for the person with OCD so they can avoid a trigger
- (ii) Helping them to avoid people, places and activities that might trigger the problem
- (iii) Helping them to avoid unpleasant thoughts, emotions and memories that might trigger the problem

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- (iv) Holding yourself back from saying or doing things that might trigger the problem
- (v) Avoiding tackling the problem because it causes them too much distress
- (vi) Making excuses for them so that they would not have to face difficult situations.

Can you identify the most common ways that you help to avoid triggers with your person with OCD?

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Think about how often you have responded this way in the past week. How helpful was it in getting on with your own and your relative's day-to-day activities and why? How helpful would it be to get rid of the OCD problem in the long term?

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**5b) Facing triggers**

If you are helping your relative with OCD to avoid triggers, then the following may be goals to work towards.

- (i) I will help my relative to face the things they are afraid of repeatedly, in a way that we both agree in advance
- (ii) I will be compassionate towards my relative after they had done something to face their fears, or stayed in a difficult situation
- (iii) I will help my relative to face the things they are afraid of consistently, regardless of how they are feeling
- (iv) I will help my relative to face the things they are afraid until their anxiety improves after each exposure tasks.
- (v) I will encourage my relative to take risks and test their fears
- (vi) I will encourage my relative to carry out activities which could be helpful to them
- (vii) I will encourage my relative to spend time with other people

Can you identify the goals that would be helpful to encourage your relative to face their fears?

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If you work towards these goals, do you think it will improve your relationship with your person with OCD? How helpful do you think it would be in getting on with your own or your relative's day-to-day activities and why?

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### **6a) Taking over responsibilities**

Taking over responsibilities is another way of accommodating a person with OCD. Here are some examples:

- (i) Taking over duties and tasks for the person with OCD which they used to do for themselves
- (ii) Making decisions for them that they should be making themselves
- (iii) Sorting out problems for them
- (iv) Watching over them to make sure that they cope or do not make mistakes
- (v) Treating them as younger or less capable than is reasonable
- (vi) Accompanying them because they cannot now do things on their own
- (vii) Advising them or checking up on them because of the problem

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Can you identify the most common ways that you take responsibility for the person with OCD?

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Think about how often you have responded this way in the past week. How helpful was it in getting on with your own and your relative's day-to-day activities and why? How helpful was it to get rid of the problem in the long term?

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### **6b) Facing responsibilities and fostering independence**

These are some of the goals to work towards for taking responsibility and fostering independence.

- (i) I asked or expected them to do things which they need to do for themselves, e.g., making themselves food, going out on their own, taking on responsibilities

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- (ii) I encouraged them to make their own decisions about things
- (iii) I allowed my relative to take responsibility for their own life and actions. For example, I did not scrutinise their actions or try to take charge
- (iv) I helped my relative tackle the problem whilst reinforcing to them that they are responsible for their own life
- (v) I encouraged them to be independent
- (vi) I allowed them to do things on their own even if I thought they might not succeed
- (vii) I noticed and praised them when they showed signs of independence
- (viii) I provided them with the opportunity to be independent

Can you identify the goals that would be helpful to encourage your relative to take responsibility?

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If you worked towards these goals, how helpful do you think it would be to get on with your own or your relative's day-to-day activities and why?



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