

Avoiding the Overprotection Trap: A Therapist's Advice for Parents of Kids with OCD

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Every parent of a child with OCD has a natural desire to do anything they possibly can to get rid of their child's distress and anxiety and to somehow make their child's life better. You have probably thought to yourself or told others, "I would do anything to take away their OCD." It is especially difficult to witness your child's suffering if they are very young or severely affected. If you are like many parents of children with OCD, your desire to help your child has driven you to engage in what therapists call overprotective behaviors. Overprotective behaviors include stepping in too quickly to alleviate distress, and doing things to quickly help your child feel better even though your assistance might reinforce fear and misperceptions that they are unable to cope. Problematic overprotective behaviors can include providing reassurance, engaging in rituals for your child, promoting avoidance of situations that might provoke OCD, doing homework or school projects for your child when their OCD makes these difficult or making excuses for your child so that the natural consequences of their OCD do not occur. If you have become very involved in overprotective behaviors, then you may feel that your child's OCD rules most aspects of your life.

Research on parental overprotection shows these behaviors actually hinder your child's ability to grow emotionally and prevent their recovery from OCD. Making too many accommodations because of OCD interferes with learning, including the important experiences necessary to overcome OCD that center on facing fears (i.e., the process of exposure, habituation, and response prevention). Parents who are overprotective accidentally sacrifice the future well-being of their child to provide a few moments of relief from OCD and anxiety related stress.

Facing fear systematically, albeit with support and love, is essential to beating OCD. Facing OCD-related fears follows the treatments with the greatest scientific support. Cognitive-behavioral therapy involves exposure to things that the child fears or finds difficult because of their OCD. Response prevention (cessation of compulsive behaviors and avoidance of feared situations) results in your child learning that their distress eventually subsides without having to engage either themselves or you in their rituals. Cognitive therapy helps your child to target beliefs about certain types of obsessions and rituals that interfere with the child's ability to do successful exposure with response prevention. Your child learns to question these dysfunctional ideas and beliefs (e.g., having a bad thought somehow makes the bad thought more likely to happen). One might say that these challenging but effective treatments help children to stop listening to the lies OCD tells them.

The dilemma for parents and children is that effective exposure and response prevention is intended to provoke the child's anxiety in the short run while allowing their anxiety to subside in the long run. For any child to learn that they can cope with their anxiety while it subsides of its own accord, they must learn to endure their obsessions without any quick fixes from rituals, parents, or therapists. Having your child participate in fear confronting exposure therapies might seem extreme when they are already suffering, but it is very effective. It is your child's very best chance for recovery. Sending your child to exposure and response prevention therapy might be considered analogous to sending your child to surgery. You know that they will feel short-term pain in order to

get long-term symptom relief. It means that you will need to accept that if you can no longer prevent your child from getting anxious because they have an anxiety disorder. It also means that the wisest and kindest choice is to do something constructive with your child's inevitable anxiety and to teach them how to manage it and eventually overcome it by engaging in exposure tasks without the interference of your overprotection.

What makes it difficult for parents to avoid overprotection? First, it is the mistaken belief that the experience of anxiety is harmful to their child. Although anxiety is very unpleasant, we do know that it does not harm children or adults. It is a normal part of being human and one that everyone has to learn to manage. The real danger lies in failing to teach your child how to properly manage their anxiety. Overprotection inadvertently teaches children that they are fragile beings who need to feel perfectly calm or happy in order to accomplish things in life. Once a child has an anxiety disorder, their best option in life is to become skilled at managing anxiety by accepting it and learning to do the things that they would normally do were anxiety not present. You are giving your child a gift of belief in their competence every time you refuse to do a ritual or refuse to give a reassurance. You are also showing them that you believe that they can survive and manage their fear.

Many parents believe that their child can only feel loved by their parents if the parents are making the child feel happy. Alternatively, they fear that their child does not love them when their child is expressing displeasure. Therefore, tasks such as exposure therapy practice seem to be cruel because they make the child unhappy, anxious, and angry. Children are also clever at manipulating this belief by frequently stating, "If you loved me you wouldn't make me do this!" or by simply stating, "I hate you, and I hate the therapist!" Unfortunately the difficult part about being a parent is that you are responsible for teaching a child life skills that they have no ability to value because of the very fact that they are children. Many anxious children get oppositional or tearful when they are anxious. This is normal. It takes an adult to understand how important it is to do difficult or painful things in order to secure a better future. Do not expect your child to agree with your decision to take them to exposure therapy or to thank you for it. Chances are they will be adults before they fully realize how grateful they are for your efforts. In addition, research shows us that the children who feel securely attached have parents who set limits and allow them to experience distress. They also allow the child to repair his or her own mistakes. Insecure children are the ones who have parents who are always trying to give unmerited compliments and to make the child's life easier. Learn to reframe your child's protests about exposure therapy and your love as being mere expressions of OCD induced anxiety.

Lastly, many overprotective parents falsely believe that as parents they need to meet all of their child's needs. This is unrealistic since most parents are only really good at a few facets of parenting for a few different phases of their child's growth. I would challenge and encourage you to recognize and enjoy what you do well, e.g., helping with homework, listening to a teenager, staying calm with a toddler, sharing cooking and to outsource the things that you do not well. This means that you will need to use therapists, educators and others to help you raise your child and that you do not have to become an expert at everything, including treating OCD. It also means that you may need to accept less than perfect recovery in your child and less than perfect parenting in yourself because it is never possible to perfectly complete all therapy assignments and exposure tasks all of the time. The real secret to recovery from OCD is persistence instead of getting every exposure step exactly right. Sometimes when your child's OCD is severe and difficult to treat you may mean that you have to admit short-term defeat as a parent and send your child to residential treatment to achieve long-term victory over OCD.

In summary, learn to view overprotection as the enemy of recovery. Use your parental wisdom to help you coach exposure practice and to reclaim your home as a space in which OCD no longer rules. If it is really tough to do this, then ask for help for yourself to help you challenge and overcome your own beliefs that push you to be overprotective. Some day your child will thank you for it-but not during tomorrow's exposure homework.

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