

"I'm soooo OCD"

+ Other Common Myths About Obsessive Compulsive Disorder



International
OCD
Foundation

MYTH: WE ARE ALL "A LITTLE BIT OCD" AT TIMES.

FACT: OCD is not a personality quirk or a character trait — it is a very real mental health condition that affects about 2 to 3 million adults, and half a million youth, in the US alone. While many people can have obsessive or compulsive traits, OCD stands for obsessive compulsive disorder, and people who are diagnosed with OCD cannot simply "turn it off." Research has shown that their brains are wired differently than the brains of people without OCD, and as such OCD strongly influences their thoughts and actions.

MYTH: OCD IS NOT THAT BIG A DEAL, PEOPLE JUST NEED TO RELAX AND NOT WORRY SO MUCH.

FACT: Having OCD is not simply an overreaction to the stresses of life. While stressful situations can make things worse for people with OCD, they do not cause OCD. People with OCD face severe, often debilitating anxiety over any number of things, called "**obsessions**." This level of extreme worry and fear can be so overwhelming that it gets in the way of their ability to function. To try to overcome this anxiety, people with OCD use "**compulsions**" or rituals, which are specific actions or behaviors. These compulsions are not activities a person with OCD does because they want to, but rather because they feel they have to in order to ease their fears. OCD is not about logic — it is about anxiety and trying to get relief from that anxiety.

MYTH: OCD IS JUST ABOUT HAND-WASHING, CLEANING, AND BEING NEAT.

FACT: Triggers related to cleanliness and symptoms related to washing make up only a small part of the range of OCD triggers and symptoms. People with OCD can have obsessions related to a wide variety of things, including losing control, hurting others, unwanted sexual thoughts, and many more. Similarly, the anxiety caused by these obsessions can be lessened by different compulsions, such as "checking" (e.g., re-checking door locks, repeatedly making sure the oven is off), "repeating" (e.g., doing the same action or ritual over and over to be sure it was done "correctly"), and "counting" (e.g., doing things in certain numbers, counting items to certain numbers).

MYTH: PEOPLE WITH OCD ARE JUST "WEIRD," "NEUROTIC," OR "CRAZY" AND THERE IS NO HOPE FOR THEM TO EVER LEAD HAPPY, FUNCTIONAL LIVES.

FACT: With proper treatment, it is very possible for people with OCD to lead full and productive lives. Many people respond positively to behavioral therapy and/or medication. Specifically, Exposure and Response Prevention or ERP is considered the first-line treatment for OCD. Additionally, medication (such as anti-depressants like SSRIs) may also be recommended for people with OCD. Family therapy can also be very beneficial since family members (including parents, siblings, and spouses) often play a major role in recovery. Finally, many individuals report that support groups are very helpful. Support groups provide a safe place for people with OCD to feel less alone, as well as to teach and learn from their peers. People with OCD use one or several of these options to help them manage their OCD, as well as the support and understanding of their loved ones.

HOW CAN I HELP?

- Oftentimes, people don't realize that their words or actions are stigmatizing or trivializing the suffering of those with OCD. The next time you hear someone say that someone or something is "so OCD," engage them in conversation about what OCD really means and why what they're saying is dismissive and inaccurate.
- Educate yourself about OCD, and work to raise awareness in your community however you might feel comfortable.
- Sign up to become an *OCDvocate* (OCD advocate) and join us in spreading awareness as part of the IOCDF Ambassador Program.
- Visit the IOCDF website or follow us on social media to learn more ways to help.

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