A Newsletter Dealing with Obsessive Compulsive Disorder

NEVER say NEVER



In the midst of the seemingly endless storm, look to the promise of the rainbow the rain shall not prevail!

Fall 2018

Relationships and OCD

We have talked here before about some of the dynamics involved in family relationships and in parent/child relationships when dealing with a loved one suffering from OCD. We learned ways to help and support through understanding without accommodating.

But what about the added challenges that are encountered when considering partner relationships? How can we identify these and what steps can we take to mitigate their impact on the relationship?

Further complicating the issue is a point of view that was brought up by one of our OCDFM members, who recently submitted his thoughts and fears on the subject of marriage when struggling with OCD. In expressing his own doubts about the success of such a union, he focused attention on the stigma that he sees as undermining the general acceptance of mental illness in our society. See his article on page 5.

Note that we are not talking here about the specific manifestation known as Relationship OCD (rOCD), in which the sufferer experiences fears and obsessive thoughts about the suitability of his or her partner or about the relationship itself. In this issue of *Never Say Never*, we look at ways that couples might work together with empathy, compassion, and mutual respect brought about by knowledge and understanding of the enemy that threatens to break them apart. As with all things in life, we strive for success through strength.

HAPPY HOLIDAYS

The OCD Foundation of Michigan wishes everyone the best of the holiday season, and a New Year filled with good health and happiness, hope, and peace of mind.

THE OCD FOUNDATION OF MICHIGAN

P.O. Box 510412 Telephone (voice mail): (734) 466-3105

Livonia, MI 48151-6412

E-mail: OCDmich@aol.com Web: www.ocdmich.org

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NEVER say NEVER

is the quarterly newsletter of The OCD FOUNDATION OF MICHIGAN, a 501(c)(3) non-profit organization.

Please note that the information in this newsletter is not intended to provide treatment for OCD or its associated spectrum disorders. Appropriate treatment and advice should be obtained directly from a qualified and experienced doctor and/or mental health professional. The opinions expressed are those of the individual authors.

To submit articles or letters, write or e-mail the OCDFM at the above addresses.

LIST OF SELF-HELP GROUPS

ANN ARBOR:

1st Thursday, 7-9 PM
St. Joseph Mercy Hospital Ann Arbor
Ellen Thompson Women's Health Center
Classroom #3
(in the Specialty Centers area)
5320 Elliott Drive, Ypsilanti, MI
Call Bobbie at (734) 522-8907 or (734) 652-8907
E-mail OCDmich@aol.com

DEARBORN:

2nd Thursday, 7-9 PM
First United Methodist Church
22124 Garrison Street (at Mason)
In the Choir Room (enter under back stairs)
Call Bobbie at (734) 522-8907 or (734) 652-8907
E-mail OCDmich@aol.com

FARMINGTON HILLS:

1st and 3rd Sundays, 1-3 PM
BFRB Support Group
Body-Focused Repetitive Behaviors
Trichotillomania and Dermatillomania
(Hair-pulling and Skin-picking)
Beaumont Hospital Botsford Campus
Administration & Education Center, Classroom C
28050 Grand River Ave. (North of 8 Mile)
Call Bobbie at (734) 522-8907 or (734) 652-8907
E-mail rslade9627@aol.com

GRAND RAPIDS:

Old Firehouse #6
312 Grandville SE
Call the Anxiety Resource Center
(616) 356-1614
www.anxietyresourcecenter.org

Anxiety Disorders

Meets every Wednesday, 4:30 to 5:30 pm and 7 to 8:30 pm (two groups offered at this time to keep group size smaller)

A weekly support group open to anyone who has an anxiety problem (including trichotillomania and Obsessive-Compulsive Disorder).

Teen Anxiety Disorders

Meets every Wednesday, 4:30 to 5:45 pm A weekly support group open to teens aged 14-18 who have an anxiety problem.

Open Creative Time

1st Wednesday, 6:00 to 7:00 pm Take your mind off your worries by being creative. Bring a project to work on or enjoy supplies that are available at the ARC.

Social Outing Groups

Offered once a month.

Dates and times change.

Check the ARC website for current listings.

LANSING:

1st Monday, 7-8:30 PM Delta Presbyterian Church 6100 W. Michigan Call Jon at (517) 944-0477 E-mail jvogler75@comcast.net

LAPEER:

DISCONTINUED

PETOSKEY:

DISCONTINUED

ROYAL OAK:

1st Wednesday, 7-9 PM
Beaumont Hospital, Administration Building
3601 W. Thirteen Mile Rd.
Use Staff Entrance off 13 Mile Rd.
Follow John R. Poole Drive to Administration Building
Park in the South Parking Deck
Meets in Private Dining Room
(If the building is locked, press the Security button next
to the door, tell them you are there for a meeting, and
they will buzz you in.)
Call Kevin at (248) 302-9569
E-mail kevinkuhn2015@gmail.com

Remembering Terry Brusoe



Longtime OCDFM Board member, Treasurer, Corresponding Secretary, support group leader, and all-around mental health advocate, Terry M. Brusoe, passed away on October 21, 2018. Terry had an impressive knowledge of everything OCD- and anxiety-related, and he had an equally impressive library of books and technical articles.

The list of books on the Suggested Reading page of every one of our newsletters was supplied by Terry, and we could always count on the titles to be new (or classic) and always relevant. Terry was an integral part of The OCD Foundation of Michigan, and his loss will be deeply felt for a long time to come.

Words of Wisdom

"Never give up on someone with a mental illness. When 'l' is replaced by 'We', Illness becomes Wellness." - Shannon L. Alder

"I'm tired of being inside my head. I want to live out here, with you."

- Colleen McCarty

People are like stained-glass windows. They sparkle and shine when the sun is out, but when the darkness sets in, their true beauty is revealed only if there is a light from within."

- Elisabeth Kubler-Ross

"When the Japanese mend broken objects, they aggrandize the damage by filling the cracks with gold. They believe that when something's suffered damage and has a history it becomes more beautiful." - Barbara Bloom

Should OCD Patients Marry?

By A.K.



Should OCD patients marry? What are the obstacles and difficulties and consequences?

This is a very difficult problem, because OCD is a complex psychiatric disorder. It has a broad spectrum, ranging from ritualistic behavior, like washing hands hundreds of times, checking and rechecking, to debilitating intrusive thoughts.

First, it can be very difficult because men and women might shy away from a prospective partner who has psychiatric problems.

Secondly, often such OCD patients don't have a stable job, and they can lose their job anytime due to a lack of alertness and concentration associated with their condition. Employers who are more interested in maintaining a controlled workplace are less likely to be compassionate toward an individual whose behavior might disrupt that workplace.

Further, because money and finances can be contentious issues in any marriage, an OCD'er who marries risks losing a significant portion of whatever assets he has in the event of a divorce, and unfortunately, the rate of divorce can be higher in unions complicated by issues such as these.

In the face of such odds, is it really necessary or desirable for OCD'ers to marry? Perhaps they should think twice before doing so. Might they not be happier remaining unmarried, enjoying their hobbies and other aspects of their lives? Even many normal people are happily unmarried. Do we dare take the risk?

(Editor's note: I wanted to start off this conversation with an example of how negative personal experience and societal stigma could work together to cause an individual to have a very dark view of life options when dealing with a mental illness. OCDFM member AK posed this question, then expressed what for many might be the inevitable answer. How often does the fear, even the expectation, that a potential life partner might reject you because of your mental illness, turn one away from even considering such a relationship? We ask you, our readers, to respond to this with your own experiences. Have you encountered any of these negative occurrences in your own relationships? How have you dealt with them? We want to hear from you on this important question. Send your comments to us at ocdmich@aol.com.)

OCD Relationships: What They Are, How to Manage Them

Medically Reviewed By Daniel Sher, MA, Clin Psychology October 28, 2018

Relationships in which at least one partner has Obsessive Compulsive Disorder (OCD) can be difficult, both for the person with OCD and the person that loves them. Obsessive compulsive disorder can put a lot of strain on a relationship, and in some cases the anxiety may be centered around the relationship itself.

Information for Partners and Sufferers

In this article, we'll go over some brief information on OCD relationships for both partners. However, note that this information should not be used as a replacement for formal OCD treatment.

rOCD - A Type of OCD

First, let's discuss something called rOCD, also known as "relationship obsessive compulsive disorder." While people associate OCD with things like germs and door knobs, the truth is that OCD can manifest in many ways, because "obsessions" can be about nearly anything.

Because relationships play such an important role in people's life, it's possible to suffer from OCD symptoms related to your relationships. For example:

- Obsessions over your partner's flaws.
- Obsessions over love, and the reciprocation of that love.
- Significant reassurance seeking behavior (self-doubt obsessions).

These can lead to all sorts of different behaviors within the relationship that often put strain on the relationship, possibly leading to a breakup. It is very common for those with rOCD to break up or separate from partners due to these perceived flaws.

Traditional OCD and Relationships

But even if you do not have rOCD, obsessive compulsive disorder can affect your relationships a great deal. Those with OCD often feel that their partners are frustrated with them, and that they are not well understood. They feel shame and guilt over their anxieties, and may display irritability.

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OCD Relationships (Continued from page 6)

OCD absolutely affects relationships because having OCD affects a person more generally, often on a deeper level. Those in relationships often worry about ruining their relationship, which unfortunately leads to more anxiety which makes OCD that much harder to manage.

Being in a Relationship With Someone With OCD

Partners in OCD relationships also have their own challenges. Watching a partner struggle with anxiety and compulsions is hard enough, but in some cases OCD can interfere with your ability to be together, such as having to rush home from a vacation because of a preoccupation about having left the oven on, for example.

When these types of issues occur, the strain that it can take on even the strongest relationships is obvious. That's why it's so important to always be supportive, and to make sure the partner knows that you're there if they want help. The best thing you can do is research the disorder as much as possible and understand it thoroughly, because often not knowing about the disorder creates many of the tensions that add to your relationship.

Your partner will need to show a willingness to deal with their OCD, and your support will help make sure they get there. But do try to be understanding. No one wants OCD, and the irrational thoughts and feelings are not a choice.

How to Improve OCD Relationships

The best thing that you can do is talk about it openly, in an understanding environment. This isn't only true for your relationship – it also helps with some of the anxieties characteristic of OCD. If you're openly talking about the problems and how you're feeling, it may lessen some of the anxieties that come from guilt and not knowing what the partner is thinking.

OCD relationships can be tough, but it is possible to overcome these issues. OCD is something that can be managed, controlled, and even cured. It is important that both partners show a willingness to stop the OCD, of course, because without that willingness change will not happen. But obsessive compulsive disorder is controllable with the right help.

On the other hand, if you feel like OCD is seriously threatening your relationship and you need some extra support, you may want to consider a few sessions of couple's therapy in order to improve your communication skills and strengthen the bond between you.

This article comes from the CalmClinic and can be found here: www.calmclinic.com/ocd/relationships.

Taking Care of Yourself When Your Partner Has Obsessive Compulsive Disorder

November 11, 2016, Avery Tauber

When your partner is diagnosed with obsessive-compulsive disorder, it can be difficult to give full attention to the **challenges it presents for you**. It may be easier to **educate yourself** but harder to **accept the diagnosis with compassion**. There are real, accessible ways to take care of yourself, even as you help your partner get the help he or she needs. **Prioritize your own well-being and your need for support**.

I'd always known that my partner was a little uptight. She'd always insist upon doing household tasks in a certain order, and on occasion, she'd actually break down into tears over dishes unwashed or socks I'd put away without being folded. She obsessed over cleanliness to the point of demanding that I wash my own hands countless times—and nearly drove me to distraction.

When my partner was diagnosed with obsessive-compulsive disorder (OCD), I almost breathed a sigh of relief. Living with someone who has a mental health disorder can be overwhelming and isolating, to be sure. But at least I finally knew that it wasn't "all in my head"—that her behavior was, indeed, not normal.

Unfortunately, as is always the case, the diagnosis itself did not solve the disorder. Individuals who have struggled with OCD throughout their lives understand this.

The truth is, a diagnosis only makes you more acutely concerned for the person who is struggling with the disorder. We hardly ever address the emotional, mental, and even physical tolls that a partner's disorder can have on *ourselves*. As difficult as it might be for the sufferer to struggle with obsessive-compulsive disorder, accepting your own difficult emotions is key to being able to effectively navigate the illness and its far-reaching effects.

A Partner's Mental Illness Brings Challenges for You as Well

Obsessive-compulsive disorder, while common (nearly 2% of the population is diagnosed with OCD), is still consistently one of the most difficult mental illnesses to understand and cope with. As the partner of someone with a serious mental illness, you yourself will face a variety of challenges:

- Emotional stress from the initial diagnosis and/or from the unpredictability of symptoms
- Physical fatigue from lack of sleep caused by the sudden onset of your partner's symptoms at untimely hours, your own personal worry, or a sporadic diet
- Mental exhaustion from a constant fixation on your partner's needs and his or her health

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Taking Care of Yourself (Continued from page 8)

Supporting and loving your partner throughout their struggles with obsessive-compulsive disorder is absolutely possible. However, you both will benefit most if you endeavor to maintain proper self-care for your own sake. Learning how to effectively cope with your partner's obsessions and compulsions is vastly different than "putting up with" or "suffering with;" rather, coping should be a series of healthy mechanisms you can use in order to both protect your well-being and strengthen the relationship between you and your partner.

Educate Yourself on the Disorder as Much as Possible

While you may already know generalized facts about OCD, it is important that you continue learning about the disorder—especially because there is new research being done every day to better understand and treat it. Consult your partner's treatment facility and clinicians when you have questions about his or her obsessions and compulsions, visit your local library to check out books on the illness, and read studies on the disorder in online medical journals when you have the opportunity. Seeking out information can help you be an asset to your partner and yourself. With the proper education, you can:

- Better understand and predict your partner's manifestations of the illness,
- Provide more valuable help to him or her during times of duress,
- Experience self-assurance that will assist you in dealing with difficult situations,
- Strengthen your relationship with your partner, and
- Feel more confident to share your story with others in an honest and open way, finding a community and support when you need it the most.

Gaining information on obsessive-compulsive disorder can help you embark on this journey with your partner, and can help you more easily accept the difficulties that arise.

Accept Your Partner's OCD Diagnosis with Compassion

There is a big difference between recognizing that the person you love has a mental health issue, and compassionately accepting the fact that he or she is ill. Especially if you are living together, obsessive-compulsive disorder can interrupt the flow of life for you and your partner. It may be very hard for you to distinguish which actions, thoughts, and patterns are symptomatic and resultant of the illness—because they can be different for everyone.

Without a true acceptance of your partner's illness, their uncontrollable behaviors and thoughts can begin to weigh heavily on your mind, body, and spirit—potentially causing your health to wane and resentment to rise. Talking openly and honestly about your experience with your partner can help you find this acceptance and come to a mutual understanding. Compassion is the best remedy for resentment.

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Carefully Monitor Your Own Well-Being

A disclaimer is necessary here. While frequent outbursts at misplaced items, repetitive behaviors that disrupt important plans, and anecdotes about harmful behaviors may very well be manifestations of his or her mental illness, they are not things you must tolerate if they put your own mind and body at risk. If you:

- Have genuine fear about your safety and well-being,
- Experience ongoing physical, emotional, or mental abuse, or
- Risk losing a job, a home, or another important relationship,

you need to prioritize your safety, and also your ability to function healthily. Use firm and unwavering language such as:

I understand that you are in a very difficult place, but I cannot accept this type of behavior.

While I can't imagine what you're going through, I am still a person in this relationship—and am worthy of respect from you.

Remembering and being firm about your limits will help you and your partner in the long run, even if it is difficult to do in the moment.

Seek out Support and Maintain a Healthy Self-Care Routine

As you learn to embrace and accept your partner's journey, you must also remember one very crucial thing: Taking care of yourself is not, by any means, selfish. Though you may feel guilty for setting boundaries, making time for exercise, or carving out rest and relaxation moments, these actions are absolutely necessary. It is imperative that you recognize your health is just as important as your partner's. Self-care is a necessity when coping and living with a difficult mental illness such as OCD.

Seek out OCD support groups and partnerships—even online—where you can talk to others candidly about what you are going through. If you still find yourself struggling with coping mechanisms in regards to your partner's OCD, finding treatment and/or therapy for yourself can be a priority. Remember: the relationship you have with yourself is even more important than the one you have with your partner. Proper self-care can even lead to fuller, more empathetic support for him or her down the road.

Coping with a partner's obsessive-compulsive disorder is one of the hardest things you will do—and taking care of yourself first is the only way you will be able to contribute effectively to their treatment journey. Self-care, prioritizing healthy habits, and sharing your difficult emotions will not only keep you strong and stable but also help you be a rock for your partner as they face the challenges ahead.

This article comes from the Bridges to Recovery website and can be found here: www.bridgestorecovery.com/blog/taking-care-of-yourself-when-your-partner-has-obsessive-compulsive-disorder.

Advice for Spouses and Partners with Obsessive Compulsive Disorder

Julia Samton, MD Director, Manhattan Neuropsychiatric

OCD is a relatively common mental illness, affecting about 1/40 individuals. The characteristic symptoms are the presence of obsessions and compulsions. Obsessions are unpleasant and persistent thoughts, images, and/or urges. Examples include involuntary thoughts about contamination, germs, violent images, and or violent urges. The affected individual attempts to neutralize these thoughts by either suppressing them or performing a behavior or compulsion. Compulsions usually take the form of repetitive behaviors such as hand washing or counting. Although these behaviors are not necessarily related to obsessions, for example, arranging items symmetrically to prevent harm to one's family, they are an attempt to eliminate the anxiety and distress caused by excessive rumination.

Having a spouse or partner with OCD can be very overwhelming. Research shows that about 60% of family members are involved, to some extent, in the obsessions and compulsions of an individual affected by OCD. Ironically, the compulsions are often misguided attempts to keep loved ones safe, but they often create distance and replace the intimacy in a romantic relationship.

Do

Do learn about OCD

Do your best to educate yourself about your partner's illness. There are many well written books and publications about OCD. In addition, there are a number of organizations such as National Alliance for the Mentally Ill (NAMI) and Center for Addiction and Mental Health (CAMH) that provide help lines, education, discussion groups, and social networks for those suffering from or affected by OCD. These organizations also have programs for special populations such as spouses, veterans, and students. Joining a support group can also be beneficial. Sharing perspectives and strategies with other in a similar position can reduce the stress that isolation creates.

Do help your partner get treatment

Obsessive Compulsive Disorder does not go away on its own. Encourage your partner to get help from a mental health professional. Often a combination of behavioral strategies and medication can greatly reduce the suffering of an individual with OCD. Unfortunately, affected individuals are often reluctant to seek treatment. Perhaps they fear that a professional might diagnose them as "crazy." Others feel hopeless and skeptical if anyone can alleviate their symptoms. This is rarely the case. There are a number of different treatments that reduce the pain and suffering of OCD.

Do maintain open and honest communication

Encourage your spouse to talk about his/her symptoms. It is essential that you know the challenges your partner is facing. This will keep him/her from turning inward during times of difficulties. The more open

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Advice for Spouses and Partners (Continued from page 11)

you are, the easier it will be to identify triggers and stressors that exacerbate your partner's OCD.

Do seek couples/family therapy

It is natural to feel frustrated or resentful when your spouse's OCD interferes with your family life. When this occurs, it is critical to take steps to restore your relationship. A therapist's office is a safe place to discuss the impact of your spouse's symptoms on your relationship. Explaining how you are affected can often provide motivation for your spouse to address lingering symptoms. It can also remove some of the pressure feelings of isolation created by being a caretaker.

Do talk to your children about your spouse's OCD

Children have an intuitive sense when something is stressing the family unit. They also are prone to blame themselves for any perceived disturbance. It is important to tell them that that their mommy or daddy has a sickness, similar to a cold or flu, that makes him/her worry a lot. You can explain that their illness does not affect their throat or ears, but rather the way that they feel and think. It makes them want to check things over and over or be concerned about cleanliness and order. Reassure the child that they did nothing to make their parent sick, and that the doctors are working hard to make their mommy or daddy better.

Don't

Do not isolate

It is important for you to maintain a social life and relationships outside of the home. Make sure you have your own support when your spouse's symptoms escalate. OCD tends to run in families, and many affected individuals have first generation family members with either OCD, anxiety disorder, or depression. Discussing your spouse's symptoms with family members may help to form a small, naturally occurring support group with others affected by a similar process.

Do not participate in rituals

It is common for individuals with OCD to involve their spouses in their compulsive rituals. This might take the form of helping out with checking, ordering, or cleaning. It can be tempting to collude with your spouse in order to "keep the peace." However, in order for your partner to make progress, it is important for him or her to resist these behaviors and eventually work on extinguishing them completely. Accommodating your spouse might feel better in the moment, but in the long run, it reinforces the compulsive behaviors.

Do not take your spouse's behavior personally

It can be easy to assume that when your partner is acting rigid and inflexible that he/she is not listening to you, being stubborn, or not motivated to change. It is important to not take his/her behavior personally. Try to remain calm and avoid losing your temper. Communicate directly that you are frustrated and that this is challenging for you as well. Try not to criticize, be defensive or contemptuous. When possible, mix humor with support and caring to defuse a tense atmosphere.

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Advice for Spouses and Partners (Continued from page 12)

Do not overlook the big picture

Remind yourself that OCD is an illness that afflicts your spouse, but it does not define him/her. At times, the symptoms can be overwhelming, but they are not synonymous with your partner's character. The former is unaffected by your obsessive thoughts or compulsive rituals. Your partner's underlying true self is what is left when these symptoms are not overshadowing them.

Do not forget the long view

Recognize that progress does not mean perfection. Incremental positive steps are sometimes hard to see, but, as long as your spouse is trying to move forward and receive treatment, he or she can expect to improve. Try not to keep score or make comparisons in your mind. Remember that each of us are trying to ameliorate our own limitations and personal obstacles. Having compassion and patience for you and your spouse can keep you from feeling angry and defeated.

Summary

OCD is a relatively common psychiatric disorder, affecting about 1/40 individuals. It is characterized by repetitive, intrusive thoughts and behaviors aimed at reducing the impact of these negative ruminations. It can be very difficult to have a spouse with OCD. At times your partner's rigidity and inflexibility can be overwhelming. Nevertheless, it is possible to maintain a loving relationship by engaging in behaviors such as learning about OCD, keeping open communication, helping your partner seek treatment, and consulting a family therapist when necessary.

It is important to keep perspective by recognizing that although your partner or spouse is affected by OCD, he or she is not defined by OCD. Your partner's true personality characteristics endure and are unaffected by his/her illness.

Dr. Julia Samton is Board Certified in Psychiatry and Neurology and is currently the Director of Manhattan Neuropsychiatric, P.C. Dr. Samton is a voluntary faculty member at New York Hospital Weill Cornell and Lenox Hill Hospital in New York City. This article comes from the ExpertBeacon website and can be found here: expertbeacon.com/advice-spouses-and-partners-obsessive-compulsive-disorder.



"One awesome thing about Eeyore is that even though he is basically clinically depressed, he still gets invited to participate in adventures and shenanigans with all of his friends. And they never expect him to pretend to feel happy, they just love him anyway, and they never leave him behind or ask him to change." ~ Unknown

PARTIAL HOSPITALIZATION PROGRAMS

There is a treatment option available for adolescents and adults in many areas that is often not known or considered by individuals who are struggling with OCD, anxiety, or depression. Partial Hospitalization Programs (PHP) are intensive programs offered by hospitals and clinics, and can benefit those who need more help than traditional outpatient settings can provide. They typically run five days a week, from 8 or 9 am to 3 or 4 pm, and can include group therapy, private time with a psychiatrist, art or music therapy or other activity time, and education programs. They usually include lunch, and some include transportation. Here, we list some of these programs for your information.

St. Joseph Mercy Hospital, Ann Arbor, MI

Adult Partial Hospitalization Program, 734-712-5850 www.stjoesannarbor.org/AdultPartialHospitalizationProgram

Adolescent Partial Hospitalization Program, 734-712-5750 www.stjoesannarbor.org/AdolescentPartialHospitalizationProgram

Beaumont Hospital, Royal Oak, MI, 248-898-2222

www.beaumont.edu/centers-services/psychiatry/partial-hospitalization-program

St. John Providence Hospital, Southfield, MI, 800-875-5566 www.stjohnprovidence.org/behavioral-health

New Center Community Services, Detroit, MI www.newcentercmhs.org/partial-hospitalization-program

Allegiance Health, Jackson, MI, 517-788-4859 or 517-789-5971 www.allegiancehealth.org/services/behavioral-health/services/partial-hospitalization-program

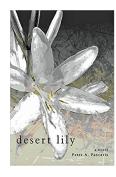
New Oakland Child-Adolescent & Family Center, 5 locations in tri-county area, 800-395-3223

www.newoakland.org/mental-health-services/face-to-face-day-program.html

SUGGESTED READING



Karen J. Landsman, Kathleen M. Rupertus, Cherry Pedrick *Loving Someone with OCD: Help for You and Your Family* New Harbinger Publications, 2005
ISBN 978-1572243293



Peter Pascaris

Desert Lily, A Novel
iUniverse, Inc, 2007
ISBN 978-0595441204

Anthony Phoenix

Married To OCD: Stop OCD From
Ruining Your Marriage

Kindle Edition

Amazon Digital Services, 2015

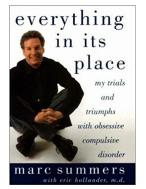


Jeff Bell Rewind Replay Repeat: A Memoir of Obsessive Compulsive Disorder Hazelden, 2007 ISBN 978-1-59285-371-7





Joan Davidson, PhD
Daring to Challenge OCD:
Overcome Your Fear of Treatment and Take Control of Your
Life Using Exposure and Response Prevention
New Harbinger Publications,
2014
ISBN 978-1608828593



Marc Summers, with Eric Hollander, MD Everything In Its Place: My Trials and Triumphs with Obsessive Compulsive Disorder Tarcher/Putnam, 1999 ISBN 0-87477-990-1

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Always get the latest news and events. Go to our Facebook page, www.facebook.com/pages/The-OCD-Foundation-of-Michigan/192365410824044 and click "Like".

PROFESSIONAL DIRECTORY

List with us

Treatment professionals, what better way to find the OCD sufferers who need your help, and to give them a way to find you. Just place your business card in *Never Say Never*, the quarterly newsletter of The OCD Foundation of Michigan. For just \$25.00 per issue, your card can be in the hands of the very people who need you most. It's a great way to reach out to the OCD community, and at the same time support The OCD Foundation of Michigan. Send your card to OCDFM, P.O. Box 510412, Livonia, MI 48151-6412, or e-mail to OCDmich@aol.com. For more information, call 734-466-3105.

Antonia Caretto, Ph.D., PLLC

Licensed Clinical Psychologist www.BeTreatedWell.com (248) 553-9053

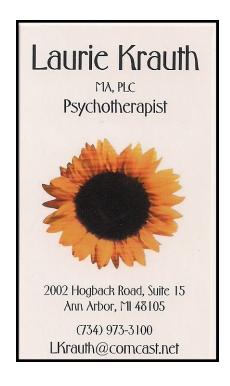
Office hours by appointment 25882 Orchard Lake Road #201 Farmington Hills, MI 48336

P.O. Box 2265 Dearborn, MI 48123

JAMES A. GALL, PH.D., PLLC

LICENSED PSYCHOLOGIST
SPECIALIST IN THE TREATMENT OF
ANXIETY DISORDERS

TELEPHONE (810) 543-1050 FAX (248) 656-5004 950 W. Avon, Ste. 3 Rochester Hills, MI 48307



Jessica Purtan Harrell, Ph.D.

Licensed Clinical Psychologist (248)767-5985

33493 W. 14 MILE RD. SUITE 130 FARM HILLS, MI 48331

DRJESSICAHARRELL@GMAIL.COM WWW.MI-CBT-PSYCHOLOGIST.COM Laura G. Nisenson, Ph.D. Licensed Psychologist

425 E. Washington Suite 101D Ann Arbor, MI 48104

(734) 623-0895

PLEASE HELP

The OCD Foundation of Michigan is funded solely by your annual membership fees and additional donations. We have no paid staff. All work is lovingly performed by a dedicated group of volunteers. WHY NOT VOLUNTEER YOUR TIME? Call 734-466-3105 or e-mail OCDmich@aol.com.

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			12/20

Please Don't Throw Me Away

You've finished reading me and don't need to keep me anymore. Or worse (boo-hoo), you don't need me and don't even want me. In either case, please take me somewhere where I can help someone else. Take me to your library. Take me to your doctor, therapist, or local mental health clinic. Take me to your leader. But please, please, don't throw me away.



The OCD Foundation of Michigan Mission Statement

- ♦ To recognize that Obsessive~Compulsive Disorder (OCD) is an anxiety~driven, neurobiobehavioral disorder that can be successfully treated.
- ♦ To offer a network of information, support, and education for people living with OCD, their families and friends, and the community.

IF YOU WOULD LIKE TO BE ADDED TO OR DELETED FROM THE MAILING LIST PLEASE CONTACT US

The OCD Foundation of Michigan P.O. Box 510412 Livonia, MI 48151-6412