

Youth Support - Professional Training
Reprints - Series Two No 12

"Obsessive, Compulsive Young People"

'One Track Minds?'

- The Obsessive Personality -

'One-Track' Minds?

Committed and determined, or narrow and 'one-track' minded, - which is the true meaning of obsessive?

The obsessive part of our personality protects us from the emotional world around us by concentrating our attention on routine and order.

In moments of crisis the comfort of a routine can pull us through - the act of brewing tea in an air raid - the ritual of laying out a trolley for an emergency operation - going through a carefully rehearsed routine on 'auto pilot' in times of stress.

Moving from Feeling -> Thinking -> Acting

Routines as above are obviously purposeful and moreover can fulfil the same purpose for any number of people performing them. Anyone well trained in the same form of martial art will automatically perform a defensive action in response to an attack - and perhaps feel the fear later. A good driver will be 'programmed' to wrench the driving wheel sideways to avoid the oncoming truck - and, danger over, may sit shaking by the roadside.

Let us consider the individual routines and rituals. What purpose do they fulfil? Each has it's own significance, each can be protective by fending off emotion, but the form taken may not demonstrate an obvious purpose to the outsider.

Children make no bones about their rituals and magical protection - often incorporating them into games and rhymes 'Step on a crack, and break your back', games of 'tag' when avoidance of being touched by 'it' conjures a sense of avoidance of contamination. Children will invent rituals which when performed accurately will protect from various imagined dangers - 'Avoid the creaking floorboards in the hall, jump over the mat and say the alphabet backwards while you climb under the covers - so the bogey man won't grab you from under the bed'.

Children fill their worlds with symbols to explain the unexplainable and communicate with each other through their common fantasies. As adults, we can do the same - using symbolism to frame the intangible ideas of our spiritual world and conforming to ritual to 'control' the powerful forces of good and evil personified in our ideas of God, Angels and Devils.

Superstitions and rituals - throwing salt over your left shoulder; dipping your fingers in holy water and crossing your self on entering church - where does superstition and religion overlap?

Rituals allow us to get in touch with mystical parts of our world and open a path to magic and fantasy. You can travel into a dangerous mythical world if you have the protection of knowing the right rituals. This is a way for the child to understand the inner turmoil of his thoughts - by imposing an imagined order. The rules of superstition and folklore bring order to an outside world that we do not understand. For a child and for an adolescent they also bring order to the chaos

of a disordered inner world of powerful feelings and emotions in danger of going out of control and swamping the developing personality.

As an aside, it is interesting to consider why fantasy games such as 'Dungeons and Dragons' have such a following, where the drama unfolds while the hero is magically protected by symbols such as cloaks of invisibility and the scenario controlled by a dungeon master - does this appeal to our obsessive natures?

All this sounds very creative and exciting - hardly the classic image of the obsessive / compulsive personality. But consider the dilemma of the child with his magical protections, growing up in a world where real experiences and events are unfolding around him. Could the pull of his fantasy world, the magical properties of his rituals, draw him aside from experiencing the real excitements and challenges of his environment, cut him off from the real world and enslave him in what have therefore become empty rituals.

The obsessive is setting up a defence against his feelings, he is controlling his outer world, putting up firm boundaries and rules in order to allow no opportunity for the unexpected. He will not be taken by surprise by a turn of events which may make him feel insecure or provoke an emotional response. Thus by controlling his outer world, he is also imposing order and control on his inner world. He is like a man shoring up his house against a tornado, checking every barometer and weather station to make sure that he is not in the danger zone, but nevertheless taking every precaution as if he were.

In trying to foresee every eventuality, control the uncontrollable, he is like 'Atlas' holding up the world or Canute commanding the tide to turn - setting himself the impossible task brings the inevitable fear of failure and loss of control.

In order to effectively control a situation one must maintain flexibility. in order to survive a storm one must weather it, bend with the wind. If we try to use every last ounce of strength to oppose a powerful force, we have no reserves to protect ourselves when we are overcome - like the man who holds on desperately to a whole armful of bricks, unable to set one down, he must eventually drop the lot, lose everything when his reserves run out. The obsessive maintains such rigid control that he must inevitably lose strength, he cannot 'keep his expectations flexible' and thus succumbs to the unexpected and the accidental.

"Softness triumphs over hardness,
Feebleness over strength.
What is more malleable is always superior
Over that which is immovable.
This is the principle of controlling things
By going along with them,
Of mastery through adaptation."

Lao-Tzu

(from 'Zen and the Martial Arts' J Hyams)

How can we impress on the white-knuckled, frightened youth that letting go of the tiger's tail will allow him to retain control, rather than catastrophically lose it?

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Kathryn had spent all her young life trying to keep control, trying to maintain order in a home that was falling apart. Her mother drank heavily and was frequently 'out cold' by the time Kathryn got home from school. At least this was preferable to the times when she would lurch into the playground to collect her younger sister, Amy - Oh the embarrassment of letting the teachers see her like that - the other children made such cruel remarks!

Kathryn felt responsible, she grew up before her time, being little mother to the family - and father too since he had walked out long before ... Every day was an ordeal - covering up to teachers, neighbours, the authorities; making sure Amy was OK; making sure Mum didn't harm herself; worrying for her when she disappeared on a binge Kathryn could not remember a time when she did not have these responsibilities and could not conceive of a time when she would be able to relinquish them.

She tried to cover every eventuality, think of every safeguard to keep things going - and, despite the drain on her reserves of strength, she managed to keep up appearances while she was at school. Amy was always clean and tidy, the house looked fine from the outside and she made sure nobody came visiting.

Life became harder when she took up a college course. She had to travel quite a distance and sometimes her train was late ... One night Kathryn returned home to find a police car outside the house .. Amy had an accident on the way home from school and when the police came to collect Mum, they found her incapable of caring for the child. So, it all came out in the open

Kathryn was reluctantly introduced to 'Alateen'- the teenage family group of Alcoholics Anonymous - while her mother was in a treatment unit. After some months, she began to take note of what was being said .. she began to grasp some of the ideas, and gradually she realised what the 'first step' of the programme, the concept of relinquishing control, admitting powerlessness, meant for her

"It's a great relief to admit you're powerless. To realise that you're only a small cog in the wheel and that you can't keep the universe going all on your own That you don't have to be strong and cope - that you can let go because you're not responsible for other people's activities, thoughts and feelings - you're only responsible for yourself.

You don't have to keep trying to juggle and keep all the balls in the air .. you can admit that you keep dropping them - that you're only fooling yourself that you're coping because really you're dying to let go .. to allow yourself to break down and face up to the reality that your life is unmanageable.

Step one gives you PERMISSION to break down, to be human and to accept reality. Without this we tend to feel GUILTY if

we don't cope and manage everything perfectly, AFRAID that something is going to go wrong, RESENTFUL that people lean on us and rely on us (because we invite them to) and full of SELF PITY because no one helps us (we don't allow them to).

Step one releases us from having to be perfect. We can be human and treat others as human beings. We can break down. We can have emotions and show them openly, we can admit our mistakes without guilt., We have a right to be wrong. We have a right to exist as complete human beings .. vulnerable , feeling people who need and CAN ACCEPT help to lead full lives."

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Freud had clear ideas about the obsessive personality - 'Orderly, parsimonious and obstinate'. These attributes he described as 'anal' characteristics. In other words, orderly, wishing to control excretion; parsimonious in the sense of not wanting to let go of anything belonging to himself - not giving up his excreta, being mean with his money - after all don't we often talk of 'dirty money'? How about 'filthy lucre', 'Where there's muck there's brass', Dickens talks of the richness of 'dust' - the then current euphemism for the mounds of refuse and contents of Victorian septic tanks. and obstinate in not doing it in the right place at the right time. A constipated anal retentive - or in common language - 'a tight arse'.

Orderly, parsimonious and obstinate - not really adjectives which any of us would like to apply to ourselves - but are they necessarily such objectionable traits? Perhaps - looked at in a different way they can be seen as attributes - consider the following words as ways of reframing these characteristics -

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| orderly | methodical; systematic; scrupulous; conscientious; carping; meticulous; fussy; careful; ethical; exacting; nit-picking; censorious; critical; disparaging; hair-splitting; reliable; dependable; reputable; consistent; invariable; stable; unflinching. |
| Parsimonious | ungenerous; ungenerous; stingy; mean; careful; honest; retentive; sparing; provident; canny; conservative; economical; frugal; sparing; Spartan; stewardly; thrifty; unostentatious; cagey; calculating; cautious; circumspect; judicious; restrained; reticent; shrewd; safe; considerate; discreet. |
| obstinate | dedicated; determined; inflexible; narrow-minded; adamant; resolute; steadfast; uncompromising; bullheaded; stubborn; single minded; self control. |

Certainly there are positive and negative ways of connoting the need to superimpose control and order on our surroundings.

All aspects of our personalities have their good and bad sides. All have evolved out of a need to cope, survive and protect in various circumstances, hence all have a positive useful side in certain contexts and can be a hindrance in others. At certain times we need to be meticulous and 'concrete' in our thinking - like a bomb defusing squad - no room for emotion - at other times the depressive side of our personality needs to empathise and care for others, each to it's allotted place and time.

Such factors need also to be considered in working out how best to engage an individual in a certain task, in learning or in therapy. Children experience periods of 'creativity' and abandoned play and other times when they are greedy for information, when their 'obsessive' thirst for knowledge enables them to memorise and learn by rote without the encumbrance of emotional distraction - as in the so called 'latent phase' (usually said to be approximately the period between ages 6 and 12).

One would certainly expect an accountant to be meticulous and accurate in recording ledgers and an obsessive personality would no doubt be of advantage for that profession - possibly also for the scientist recording experiments and rigidly confined to the scientific principles of investigation - or for the lawyer pedantically examining every shred of evidence. But the creative artist would be hampered by having to detail every blade of grass in a composition and the writer who 'Could not write five words without changing seven' as Dorothy Parker stated would hardly produce a flowing essay.

Creativity is akin to tapping our instinctive feelings - that which the obsessive is afraid of. Instinct and primitive feelings and impulses can be regarded as out of control. Basic untamed urges, which are probably destructive. At times society has taken this view on board to brand sexual urges and feelings as base 'animal' instincts - and young people, in whom these urges can be seen to be developing, have similarly been judged as dangerous untamed elements of society.

The obsessive fears these primitive feelings in himself and also that which he senses to be present in others - hence the feeling of tame or be tamed - control or be controlled.

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Fiona was a proud housewife. She wanted to run a perfect happy household that her husband would be pleased to come home to. She wanted her two year old son to have all the right routine for his day and had read all the popular literature about child care. She fed him at the 'approved' intervals and gave him all the best foods - her own prepared blended foods when he was weaning, never packets or jars.

So why, why, she asked herself, did every meal time become such an ordeal, such a battle? It seemed to have been that way right from the start. The baby was always fractious, always seemed to be demanding feeds at the wrong times, waking up and wanting attention when he should be asleep.

When he started on solids, he would turn his head away when she tried to feed him, blow bubbles and spit, rub his rusk over the top of the high chair and then try to eat it ... 'Ugh! Think of the germs!'

As soon as he could hold a spoon, he insisted on trying to feed himself - of course, he couldn't do it. The spoon turned over before it reached his mouth, there was more food on the floor that inside him.

"I thought he would starve! But whatever I did he just would not let me feed him properly. And now .. well sometimes he just reduces me to tears .. it's not just the meals .. in the supermarket, grabbing things off the shelves .. screaming until I buy biscuits. I always hated those mothers you see being blackmailed into stuffing their children with sweets - but now I know how they feel!"

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Where had the love gone in Fiona's relationship with her son? Where was her appreciation of the little boy's feelings, of his need for self expression, for some freedom in which to explore his environment? The need to control produced a situation where mother would expect and compel the child to 'do it in the potty now' rather than allowing the space for the child to gleefully produce a 'gift' for mummy. Like the happy toddler who boasted - "Look, Mummy, I've done two poohs in the toilet and the water took them away".

A child brought up in this environment tends to become obsessively defended himself. He will try to avoid the criticism by thinking ahead, making sure that his 'faults' do not show and will furiously 'paper the cracks' in an attempt to hide his weaknesses. He may become a rigid authoritarian - imposing the tyranny of his self control on others around him - like the 'Victorian father' role model - or the meticulous Phineas Fogg, unable to step into a bath unless the water was at exactly the right temperature. Alternatively he may try to avoid attack by becoming submissive and apparently weak.

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Barbara was the epitome of the elegant woman. Despite holding down a very demanding career, she must have spent some hours each day on her make up and appearance since she managed to emerge from her immaculate home each morning as neat as a pin. She took great pains to make sure that everything about her was as perfect as she could make it. Her environment was a reflection on herself, her external appearance a representation of her inner self. Any external flaw could give a clue to an inner imperfection or inadequacy and thus expose her to 'attack'.

Barbara came to therapy because she felt imprisoned. She had reached a point when she felt cut off from her inner self and thus had problems relating to other people. Her meticulousness had become a burden and she was beginning not to cope - the submissive self controlling woman had reached a turning point - she was beginning to turn the feared

aggression outwards - wanting to rebel and yet fearing the result of her rebellion.

In this Barbara was behaving like an adolescent - rebelling against the security of her controlled world, but fearful of the gamut of emotions which could be released. How would she change, what sort of a person would she become, what feelings had she suppressed all these years?

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Barbara was aware of her inner anger which she had controlled by her obsessive neatness and 'niceness'. She had submissively been the butt of her family's anger - her mother's rejection, her father's abuse, her sister's jealousy. Would she continue to be the victim of this situation or turn to the role of 'persecutor' turning her anger vengefully outward? Or would she find a balance somewhere between these extremes? Such is the dilemma of a defended personality, whether it be defended by obsessive actions, depressive withdrawal or schizoid detachment. Where does one find the balance?

Adolescence is a time when we are preoccupied with finding our 'balance' - finding our place in the world and exploring who we are and who we want to be. For those of us who are most troubled and defended against understanding and experiencing our inner 'space' - then this 'adolescence' is delayed to a later watershed of life. However, in the teenage years, our bodies are also undergoing physical changes beyond our control, hormonal changes, growth, development. Such changes provide a catalyst to change and self exploration - as may life events in later years such as bereavement, divorce. The changes of adolescence can at the same time provoke an escalation of the defensive mechanisms to protect against emergent emotions.

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Mark came to a teenage counselling clinic at the age of fifteen after days of deliberation and trying to screw up enough courage to enter the door. As he sat talking he was literally wringing his hands and beads of perspiration were standing out on his forehead.

He thought he was going mad. This was the main concern, that he was mad and this would be a terrible shame to his family and a disappointment to his father who had high hopes for him. He was a very bright boy, attending private school which his Asian family were proud to pay for despite financial hardship caused by their transfer to London from Uganda as refugees. The family were close and supportive. He was too young to remember anything of the Ugandan problems but he knew that the family had to work hard to establish themselves in England - this they were accomplishing successfully.

Mark had always worked hard and was happy to do so, he wished to please his family. He had no desire to go to parties and discos, to drink like some of his friends, or to chase girls. This was why he knew he was going mad - he kept thinking about women, mentally undressing girls, and imagining

what sex was like. He tried desperately to expel these thoughts from his head, filling his head with other ideas, making himself think of complex problems, mental arithmetic, anything to stop these 'bad thoughts'.

Mark kept his eyes on the floor as he continued his unhappy tale of 'depravity' ... the problem now had escalated. He could no longer control the ideas in his head, because they took over while he was asleep ... he had dreamed about undressing a woman ... and this week he had been mortally ashamed to have had a 'wet dream'.

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Fortunately, Mark's problems were short lived. He did have a supportive family and they were able to show him that they still loved and cared for him as he changed from a diligent schoolboy to a hard working adult. Some sessions explaining the changes that his body was undergoing led to a gradual acceptance of his sexual feelings and he realised that they were not going to swamp him and take over control of his mind. Six months later Mark had stopped trying to block and expel his unwanted thoughts, he no longer found them intrusive and they had ceased to preoccupy him.

A brief period of using obsessive or ritual behaviour to control unwanted thought is not uncommon at adolescence - like the teenager who crossed her fingers and kept reciting the rosary in her head to try to stop herself from swearing while she took communion or having intrusive bad thoughts about God.

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Melanie, at the age of nineteen, was so afraid of losing control and allowing a forbidden realisation, that the obsessive part of her personality took over, protecting her from letting down her guard but locking her in a compulsive disorder and a world ruled by phobias.

Her prime complaint was a phobia of vomiting. She had not ever actually vomited since the age of four when she had eaten too much ice-cream on a family outing and had been sick on the way home, spoiling everyone's enjoyment.

Fifteen years had passed without a hint of sickness and she had hardly given the incident a thought - nevertheless, for six months now she had been quite unable to conduct her life normally due to the restrictions her phobia imposed. She could not remain alone in the flat she shared with her boyfriend, in case she was sick and choked. She was afraid to attend her college exams in case she should have to leave the room to be sick. She could not go to social events and films for similar reasons and she was limited in travel because she could only get on a train when the interval between stops was short enough for her to avoid being sick on the carriage - even then she had to get out at each stop and catch the next train to reassure herself that she was not 'trapped' on the train.

Melanie began to think that it would be a good idea to return to her home town with her fiancee and give up her college course in Liverpool 'because of her illness'.

Melanie's family were a worry to her. Her father ran his own business which was going bankrupt, and this was not the first time that his affairs had gone downhill.

"The trouble is that he is far too soft .. he gets these ideas and business is tough nowadays, so you have to be willing to work hard and be a bit hard headed but he always gets hangers-on. He ends up doing the work and working far too hard for someone of his age ... he even had a slight heart attack and his blood pressure is too high .. but he can't slow down because nobody helps him.

My mother has always been used to being looked after. She didn't have to work after they got married and Dad always made sure that she had enough money and dressed well and they went to the best restaurants. I can't blame my mother for wanting to hold on to that and being a bit selfish - that's the way it's always been for her. - But my sister!.. My sister would like to be pampered like that, in fact she expects it, but she is SO irresponsible. She went a bit wild at school so Dad had her in the office to help him and she just sat there painting her nails and was rude to customers on the phone - doesn't she realise she needs to grow up and help Dad out now?

When I go home I sort things out a bit. I start off doing the housework and getting my sister to tidy up .. then she gets at me for being miss goody, goody and showing her up ... then I help Dad out in the office. Last time I went home I found out his assistant had been cheating him and I managed to persuade Dad to get rid of him. To tell you the truth I more or less had to do it myself..."

Melanie was using her 'illness' as an excuse for returning home where she felt responsible for her family, whom she had to 'obsessively' control. She also kept the family together by giving them a common focus for their concern, she diverted attention onto her sickness and thus away from her father's failure.

Her relationship with her fiancee showed many parallels. They had known each other from their early teens and had met in the church youth club where his father was the vicar - their family was a model of love and understanding and Melanie felt honoured to be included in their circle. Justin was rather a weak ineffectual boy, not as academically bright as Melanie but she tried to boost his self worth by discussing her computer course work with him - this often provoked rows rather than the sought for closeness when he failed to understand the concepts involved. When she began her college course, he decided to take up training as a mental health worker, an auxiliary position on a level below full mental health nursing. Melanie redoubled her efforts to involve him in discussions, now focussing on his subject, but with little satisfaction. When her 'sickness' began to take over her life, his new found skills were suddenly in demand. He now had his very own patient to deal with and she had found a role model which he could be comfortable with.

When she entered therapy, Melanie quickly gained some insight into her situation. She learned some behavioural techniques to help control her panic fear of vomiting, she was able to talk to her mother about her role in the family and

relinquish some of the responsibilities to her mother, who proved more adaptable and aware than Melanie had realised. Her life became more manageable and she was actually able to sit through her end of term exams and pass them with flying colours.

Our tale does not end here. Melanie went home for the winter holiday and attended Christmas eve midnight service at her future father-in-law's church. She had pride of place in the family front pew

"It was such a disgrace .. I just did not know where to put myself. I had to leave the service right in the middle of his father's sermon ... I was mortified. Everyone was very nice about it and so sorry that I was ill. I didn't feel sick, but I knew I was going to faint and I just made it outside in time. Of course I missed out on all the celebrations, this was going to be the big celebration, we were going to get both families together. Any way I stayed in through the whole holiday. I was afraid to go out, I really didn't want to ruin anyone's enjoyment, so I cooked the Christmas lunch for everyone."

A repetition perhaps of the fear of spoiling everyone's fun which she experienced as a four year old and for which Melanie had been compensating ever since; always making sure that the family were happy and trying to keep control of their situation; always trying to keep control of herself so that her emotions would not spill over and hurt those close to her. The experience in church helped Melanie to realise that she was still holding on, still trying to protect her fiancee from her emotions, while her body was crying out for help. She saw that despite his wonderful family, despite his being the 'perfect' match for her, as her friends had repeatedly told her .. her feelings for him were not loving and committed. She could no longer protect him, she could no longer obsessively defend him and defend herself from the realisation that they had grown apart, that she did not love him and that she wished to separate from him.

When she was able to verbalise her feelings, to 'come clean' and say how she felt, Melanie's symptoms melted away. Three years later she was successfully and efficiently working in a computer firm, making positive use of her meticulous attention to detail in software production while preventing her obsessive nature to isolate her from experiencing her feelings.

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Of course having an obsessive personality does not necessarily mean that we will suffer an obsessive/ compulsive disorder. Obsessives may become depressed. depressives may become compulsive when sick. Perhaps we use parts of our personalities in coping with life and sometimes other sides to our natures when we break down under the stresses life imposes.

Similarly symptoms of obsessive disorder may be transient and deal with a particular set of events. Like the child

wanting everything 'just so' as a means of holding on to security after a family breakdown.

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Matthew's mother became very worried when, aged seven, he began rinsing glasses and plates before use and wiping seats before sitting down in Macdonalds. The more she tried to stop him, the more anxious and determined he became to complete his 'ritual'. He tidied up his possessions, hoarded pencils and rubbers in his desk at school and would not let his mother throw out any broken toys. His father had left the family and he desperately tried to prevent further loss, imposing an order on his unstable world.

With love and understanding, Matthew realised that his loss would not be compounded, that his mother would not also leave, that his sister still loved him, that his toys would not be taken away. After six months, he stopped his rituals because he had no further need for them.

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Finding the root of the anxiety allows the symptoms of a compulsive illness to be dispelled. However the symptoms themselves may be so crippling, the rituals so compelling, that normal life is almost impossible. In such a state, there is no space for therapy, the defences are so extreme that a way through is hard to find. The medical student who spends hours each morning washing, who just makes it to a lecture, touches the wrong thing and has to dive into the cloakroom to wash again, and again. The young man who is so consumed by his rituals that he cannot get out to work, each step of his preparation having to be meticulously followed and each mistake, or fear of mistake, being rewarded by starting all over again. . . Such people need practical help to break their bonds, behavioural techniques which will free them long enough to enter psychotherapy. Both disciplines are important, for without searching for the origins of their hurt and addressing the cause, their anxiety can resurface in an alternative set of complaints.