

# Understanding Behavioral Health Disorders

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Millions of Americans live with various types of behavioral health problems like social anxiety, obsessive-compulsive disorder (OCD) or autism. These disorders affect how you think, feel, act or relate to other people or to your surroundings. They are very common, and many people have one of them or know someone who has.

The symptoms can range from mild to severe, and they vary from person to person. In many cases, it makes daily life hard to handle, and that is when it makes sense to seek the help of a mental health professional.

“What these problems all have in common is they restrict a person’s consciousness, shrinking their world, and closing them off,” says Dawn Nelson, a clinical psychologist and founder of the Centre for Human Flourishing in Milwaukee. Managing these disorders can be hard work. “I try to counsel and facilitate their willingness to do something for themselves. My job is to help them develop the motivation and courage to help themselves,” she says.

The reasons behind some common behavioral health disorders are not known, but they can be successfully managed, according to Bradley C. Riemann, PhD., clinical director at Rogers Behavioral Health in Oconomowoc. “In many cases, individuals learn to manage their behavior to the point where they can lead a productive, relatively normal life,” he says.

## Obsessive Compulsive Disorder

OCD is described by the National Institutes of Health (NIH) as a common, chronic and long-lasting disorder in which a person has uncontrollable, reoccurring thoughts (obsessions) and behaviors (compulsions) that he or she feels the urge to repeat over and over. You may know people who complain – or, perhaps you have said it yourself – that they have OCD because they tend to worry about certain issues. Typically, this is not the real thing, Riemann says. “We have all done things like wash our hands even if they were not dirty or check the stove to be sure we turned it off. People who have these thoughts or do these behaviors so much that it creates interference in their lives may actually have OCD,” he says.

The NIH describes a person with OCD as generally:

- Unable to control his or her thoughts or behaviors, even when those thoughts or behaviors are recognized as excessive, such as washing hands, counting, etc.

- Spends at least one hour a day on these thoughts or behaviors
- Doesn't get pleasure when performing the behaviors or rituals, but may feel brief relief from the anxiety the thoughts cause
- Experiences significant problems in their daily life due to these thoughts or behaviors

The causes of OCD are unknown, but risk factors include genetics, brain structure and environmental factors. For example, some twin and family studies have shown that people with first-degree relatives (such as a parent, sibling or child) who have OCD are at a higher risk for developing OCD themselves. Research is ongoing.

"Millions of people suffer from OCD in this country. It is one of the top four most common psychiatric problems we have. The treatment of choice is something from behavior therapy known as exposure and ritual prevention. Or in many cases it is a combination of exposure and ritual prevention (ERP) and medication," Riemann says. Exposure therapy focuses on confronting the fears underlying a problem in order to help people engage in activities they have been avoiding.

The takeaway message is that OCD is common and treatable, Riemann stresses. "There is a good reason for OCD patients to be hopeful. The vast majority of people respond to the ERP treatment and that response typically is enough to give them back a normal life," he says.

## ANXIETY

Everyone feels anxious now and then. You may feel nervous when faced with a problem at work, before taking a test, or before making an important decision. Anxiety disorders are different, however. For a person with an anxiety disorder, the anxiety does not go away and can get worse over time. The feelings can interfere with daily activities such as job performance, school work and relationships.

There are several different types of anxiety disorders. Examples include generalized anxiety disorder, panic disorder and social anxiety disorder.

"With generalized anxiety disorder, you worry excessively about multiple life areas, even though there isn't much to worry about. With social anxiety disorder, people experience a debilitating fear of being in certain social situations. Then there's panic disorder, where someone feels terror that strikes for what may seem like no apparent reason. It may cause a racing heart, shakiness, stomach upset or other physical symptoms," he says.

As is the case with OCD, no one knows for certain what causes anxiety disorders. "The best theory is that there is probably some kind of neurobiological problem that combines with environmental

factors. The way I try to describe these things to patients and their families is there are environmental 'matches' that strike the biological 'gas' on fire. And, unfortunately, there are a lot of matches in that box, so you can run, but you can't hide from it," Riemann explains.

For example, Riemann says, "Someone with OCD or panic disorder might say they developed this condition their sophomore year in college. They were in a dorm during their freshman year, but they've moved into an apartment now and they are kind of independent and responsible for a lot more, and that might be when the OCD starts showing. Sometimes patients will say, 'If I hadn't moved out of the dorms, I would never have had OCD.' No, there are a lot of matches in that box. Chances are that something else would have come up," he says.

Anxiety disorders are generally treated with psychotherapy, medication or both. To be effective, the psychotherapy involves talking with a therapist to discuss a person's specific anxieties. Cognitive-behavioral therapy (CBT) is a type of psychotherapy that teaches a person a different way of thinking, behaving and reacting to situations that produce anxiety or fear. "We try to look at the errors in thought that people have, such as excessive worrying about areas they need not be worrying about," Riemann says.

Regarding managing anxiety, Nelson believes, "We don't necessarily want to get rid of anxiety because it is telling us something about ourselves. It can be a call to action, it can also indicate a disintegration, such as being overwhelmed in our capacity to cope. My approach to all of these problems is to look at them, embrace them, and learn from our experience with them, rather than stand back from our experience and reduce our world," she says.

## Autism Spectrum Disorder

Autism spectrum disorder (ASD) is a developmental disorder that affects communication and behavior. Although autism can be diagnosed at any age, it is said to be a developmental disorder because symptoms generally appear in the first two years of life. "While some question a neurological involvement in OCD and anxiety disorders, almost nobody questions the neurological involvement with autism," Riemann says.

Autism is known as a "spectrum" disorder because there is a wide variation in the type and severity of symptoms people experience. According to the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), a guide created by the American Psychiatric Association used to diagnose mental disorders, people with ASD have:

- Difficulty with communication and interaction with other people
- Restricted interests and repetitive behaviors

- Symptoms that hurt the person's ability to function properly in school, work and other areas of life

The severity of ASD can vary greatly and is based on the degree to which social communication, insistence on the sameness of activities and surroundings, and repetitive patterns of behavior affect the daily functioning of the individual. Some children and adults with ASD are fully able to perform all activities of daily living while others require substantial support to perform basic activities.

ASD does not spare anyone; it occurs in all ethnic, racial and economic groups, although research shows boys are significantly more likely to develop ASD than girls. The latest analysis from the Centers for Disease Control and Prevention estimates that one in 68 children has ASD. "In the 1980s, one out of 2000 children were diagnosed. Now it's one out of 68. It's probably because of the expansion of the diagnostic criteria and people tend to find what they are looking for," Nelson says.

Scientists don't know exactly what causes ASD. Although it was first described in the 1940s, very little was known about it until the last few decades. Because the disorder is so complex and no two people with autism are exactly alike, according to the NIH, there are probably many causes for autism.

Although it can be a lifelong disorder, treatments and services can improve a person's ability to function. The American Academy of Pediatrics recommends that all children be screened for autism. A diagnosis of ASD includes an assessment of intellectual disability and language impairment.

Many people with ASD find social interactions difficult. The mutual give and take nature of typical communication and interaction is often particularly challenging. "You and I might have a conversation and you might react to something I'm saying by raising an eyebrow. Someone with autism probably would not recognize that nonverbal cue," Riemann says.

Several types of treatments are available to manage autism. According to the CDC, the treatments can generally be broken down into the following categories: behavior and communication approaches, dietary approaches, medication and complementary and alternative medicine.

Reports by the American Academy of Pediatrics and the National Research Council indicate that behavior and communication approaches that help children with ASD are those that provide structure, direction and organization for the child in addition to family participation.

"Treatment for ASD is typically going to focus in on behavioral management, using reinforcement strategies to try to increase behaviors that we want to see and not reinforcing those behaviors we

don't want," Riemann says.

Because the human brain is so complex, the medical community's knowledge of behavioral health is in its infancy, according to Riemann. "Our understanding of mental health disorders has lagged behind what we know about classic physical illnesses. With each passing year, we continue to learn more about the brain and the highly complex diseases that affect it," Riemann states.