Supporting an Adult with OCD: Our Reassurance Plan

Change one repeated certainty-seeking pattern while keeping care and connection available. This is not a rule to stop answering all questions.

Adults | Planned with treating clinician.

Plan together when calm, with the treating clinician. Either person can decline or revise the plan. Do not use it in an unsafe or coercive relationship. The support person is not a therapist or symptom monitor. Write by hand, or type and save a copy.

People involved:

Clinician/review date:

1. Choose one pattern

The specific question or situation, and what usually happens next:

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How does this affect each of us? Include both perspectives.

2. Agree on one change

The repeated answer, check, or action we will reduce; our clinician-agreed first step and start date:

This plan excludes new factual information, consent, practical needs, emergencies, and safety concerns.
Other limits we want to make clear:

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3. Choose respectful language

A brief response that fits us:

Example: "I see this is difficult. I am here. Let's follow our plan rather than answer again." Do not repeat a phrase until it feels perfect or distress falls.

4. Offer connection

Support I welcome that does not settle the feared question, such as companionship, encouragement, or space without criticism:

Support person's availability and limits:

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5. Handle a difficult moment

How will we pause a heated conversation without punishment or threats, then reconnect or seek help?

6. Review together

At our agreed review: what helped us remain respectful, and what should we change with the clinician?

Next review:

Do not abruptly remove care or apply this plan to every concern. Never withhold emergency help, medication access, food, housing, consent-related information, or necessary medical care. Address safety concerns directly. Avoid tallying every request or judging each other; use records only if agreed with the clinician.