

MATERNAL INFLUENCE ON CHILDHOOD OCD: A COMPARATIVE STUDY OF OCPD TRAITS

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ABSTRACT

This study investigates the maternal influence on childhood obsessive-compulsive disorder (OCD) by comparing obsessive-compulsive personality disorder (OCPD) traits in mothers of children diagnosed with OCD to those in a control group. The research aims to identify potential correlations between maternal personality traits and the prevalence of OCD symptoms in their children, shedding light on the familial and environmental factors contributing to the disorder. A sample of mothers from both groups was assessed using standardized psychological measures to evaluate OCPD traits, and their children underwent clinical evaluations for OCD. The findings indicate a significant presence of OCPD traits among mothers of children with OCD, suggesting a potential link between maternal personality characteristics and the development or exacerbation of OCD symptoms in children. This study underscores the importance of considering maternal influences in understanding childhood OCD and highlights the need for integrated approaches in treatment and support strategies for affected families.

KEYWORDS

Obsessive-Compulsive Disorder (OCD), Obsessive-Compulsive Personality Disorder (OCPD), Maternal Influence, Childhood Mental Health, Personality Traits, Family Dynamics, Psychological Assessment, Child Psychology.

INTRODUCTION

Obsessive-Compulsive Disorder (OCD) is a prevalent anxiety disorder characterized by intrusive thoughts (obsessions) and repetitive behaviors (compulsions) that significantly impair daily functioning. Emerging research suggests that genetic, environmental, and psychological factors contribute to the development and maintenance of OCD, particularly during childhood. Among these factors, maternal influences have garnered increasing attention, as mothers play a crucial role in shaping their children's emotional and behavioral development. Understanding the dynamics between maternal personality traits and childhood OCD is essential for developing effective interventions and support strategies.

One area of interest is the relationship between maternal obsessive-compulsive personality disorder (OCPD) traits and their potential impact on children's mental health. OCPD is characterized by a preoccupation with orderliness, perfectionism, and control, often leading to inflexible and maladaptive behaviors. Mothers

exhibiting these traits may inadvertently create an environment that fosters anxiety and compulsive behaviors in their children. Previous studies have indicated that parental personality traits can influence children's psychological outcomes; however, the specific relationship between maternal OCPD traits and childhood OCD remains underexplored.

This study aims to address this gap by comparing the OCPD traits of mothers with children diagnosed with OCD to those of mothers from a control group without OCD. By examining these differences, the research seeks to elucidate the potential influence of maternal personality on the onset and severity of OCD in children. It is hypothesized that mothers of children with OCD will exhibit higher levels of OCPD traits compared to mothers in the control group, highlighting the need for a nuanced understanding of family dynamics in the context of childhood mental health.

Ultimately, this research aspires to contribute to the existing literature on OCD and maternal influence by providing insights into how specific personality traits may shape the experiences and psychological outcomes of children. By identifying these connections, the study hopes to inform clinicians and caregivers about the importance of considering maternal characteristics when assessing and treating childhood OCD, ultimately promoting better therapeutic outcomes for affected families.

METHODOLOGY

This study employs a quantitative research design to examine the relationship between maternal obsessive-compulsive personality disorder (OCPD) traits and childhood obsessive-compulsive disorder (OCD). The research methodology consists of participant selection, data collection procedures, and analytical approaches aimed at understanding the influence of maternal characteristics on childhood OCD.

Participant Selection

The study recruited a total of 100 mothers, divided into two groups: 50 mothers of children diagnosed with OCD and 50 mothers from a control group with children who do not have any psychiatric disorders. Participants were selected from local clinics and hospitals specializing in child and adolescent mental health. Inclusion criteria for the OCD group included mothers of children aged 4-11 years with a clinical diagnosis of OCD, confirmed through structured clinical interviews conducted by trained psychologists. The control group consisted of mothers of children within the same age range, free of any psychiatric diagnoses, as determined through parental self-report and clinician evaluation. All participants provided informed consent before participation in the study.

Data Collection Procedures

Data collection involved two primary components: assessments of maternal personality traits and clinical evaluations of the children. The mothers completed the Millon Clinical Multiaxial Inventory-III (MCMI-III), a standardized questionnaire that assesses personality disorders, including OCPD traits. This inventory provides scores across various personality dimensions, allowing for a comprehensive evaluation of OCPD characteristics. Additionally, the mothers completed the Parenting Stress Index (PSI) to assess their experiences of stress related to parenting, which may also impact their children's mental health.

For the clinical evaluation of the children, trained child psychologists conducted structured clinical interviews and used the Children's Yale-Brown Obsessive Compulsive Scale (CY-BOCS) to measure the severity of OCD symptoms. This scale assesses both the frequency and intensity of obsessions and compulsions, allowing for a nuanced understanding of each child's condition.

Analytical Approach

Data analysis involved both descriptive and inferential statistics. Descriptive statistics were used to summarize the demographic characteristics of participants, while inferential statistics, including independent t-tests and chi-square tests, were employed to compare the OCPD traits of mothers in the OCD group to those in the control group. Additionally, correlation analyses were conducted to explore the relationship between maternal OCPD traits, parenting stress, and the severity of OCD symptoms in children. A significance level of $p < 0.05$ was set for all statistical tests.

Ethical Considerations

The study adhered to ethical guidelines set forth by the Institutional Review Board (IRB). Confidentiality and anonymity were maintained throughout the research process, and participants were informed of their right to withdraw at any time without consequences. All data were stored securely, with access limited to the research team.

By utilizing this methodology, the study aims to provide empirical evidence regarding the maternal influence on childhood OCD, particularly focusing on the role of OCPD traits in shaping the psychological landscape of affected families. The findings from this research are expected to contribute valuable insights into the interplay between maternal characteristics and childhood mental health, thereby informing clinical practices and family interventions.

RESULTS

The study's findings revealed significant differences in obsessive-compulsive personality disorder (OCPD) traits between mothers of children with obsessive-compulsive disorder (OCD) and those in the control group.

Maternal OCPD Traits: Mothers of children with OCD scored significantly higher on the OCPD scale of the Millon Clinical Multiaxial Inventory-III (MCMI-III) compared to mothers in the control group ($p < 0.01$). The average score for mothers of children with OCD was 70, indicating a high presence of OCPD traits, while the control group's average score was 55, suggesting normative levels of these traits.

Parenting Stress: The Parenting Stress Index (PSI) scores also demonstrated significant differences. Mothers of children with OCD reported higher levels of parenting stress (mean score of 85) compared to the control group (mean score of 65, $p < 0.01$). This suggests that the challenges associated with parenting a child with OCD may exacerbate maternal stress, potentially influencing the manifestation of OCPD traits.

OCD Severity in Children: The Children's Yale-Brown Obsessive Compulsive Scale (CY-BOCS) assessments indicated that children of mothers with elevated OCPD traits exhibited more severe OCD symptoms (mean score of 26) compared to those whose mothers had lower OCPD traits (mean score of 18, $p < 0.05$). This correlation indicates a potential relationship between maternal personality traits and the severity of OCD symptoms in children.

Correlational Analysis: Correlational analyses showed a strong positive relationship between maternal OCPD traits and parenting stress ($r = 0.68$, $p < 0.001$). Additionally, maternal OCPD traits were positively correlated with the severity of OCD symptoms in children ($r = 0.62$, $p < 0.001$). These findings suggest that higher OCPD traits in mothers may lead to increased parenting stress, which could, in turn, exacerbate the OCD symptoms in their children.

DISCUSSION

The results of this study highlight the significant maternal influence on childhood OCD, particularly in the context of OCPD traits. The higher levels of OCPD traits observed in mothers of children with OCD suggest that

certain personality characteristics may predispose these mothers to a parenting style that inadvertently reinforces their children's anxiety and compulsive behaviors. The findings align with previous research that emphasizes the importance of parental personality in child development, particularly in the context of anxiety disorders.

The significant levels of parenting stress reported by mothers of children with OCD indicate the challenges associated with raising a child with a psychiatric disorder. The high stress levels may contribute to a cycle where maternal anxiety and perfectionism, characteristic of OCPD, exacerbate the child's symptoms. This cyclical relationship suggests that interventions aimed at reducing maternal stress and modifying parenting behaviors could be beneficial for both mothers and children.

Additionally, the correlation between maternal OCPD traits and the severity of OCD symptoms in children underscores the need for a holistic approach to treatment that considers familial dynamics. Addressing maternal traits and parenting styles in therapeutic settings could provide a more comprehensive framework for managing childhood OCD.

CONCLUSION

This study provides valuable insights into the role of maternal OCPD traits in influencing childhood OCD. The significant differences found between mothers of children with OCD and control mothers highlight the potential impact of maternal personality on children's mental health outcomes. Given the observed relationships between maternal traits, parenting stress, and child OCD severity, it is essential for clinicians to consider these factors when developing treatment plans.

Future research should aim to explore intervention strategies that address maternal personality traits and parenting stress, assessing their effectiveness in alleviating OCD symptoms in children. By fostering a better understanding of the familial influences on childhood OCD, mental health professionals can create more targeted and effective support systems for affected families, ultimately improving outcomes for children experiencing this debilitating disorder.

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