



**Episode #193:**

**Filmmaker Chris Baier on  
Helping Families Get Unstuck from OCD**

January 28, 2019

Debbie: Hey Chris, welcome to the podcast.

Chris: Thank you. Great to be here. Appreciate it.

Debbie: Well, I'm so glad you reached out to me about your film UNSTUCK and I just have to say for listeners and, and apologize publicly that I took a long time to get back to Chris, but I kept it in my inbox because I was like, I need to check this out. This is really important conversation to bring to the show. So thank you for your patience with me. I just want to say that and I would love it if you could take just a few minutes to introduce yourself. I've read your bio, but just tell us a little bit about who you are in the world.

Chris: Absolutely. Well hello everybody. My name is Chris and my family. We live in Brooklyn, New York. And our journey with obsessive compulsive disorder started about six years ago. My daughter was diagnosed and we spent a summer just trying to figure out what was going on and how to get her help and going to, you know, different therapists and doctors and researching and trying to find everything we could about the disorder. And it took, I would say about two years for us to really kind of right the ship and, and get her to a better place and get her to a situation where she was really being able to face her fears and, and overcome the main things that she was worried about. And during that time we had done a number of things. We had, you know, joined any group we could meeting other parents online as well as creating our own parenting group here in Brooklyn.

We, we realized immediately that not only did she need help, but we needed help too. We needed other parents that were going through similar situations that we were to kind of bounce ideas off of and laugh and cry and share. And so there was a lot of personal education growth with our family because obsessive compulsive disorder is a mental health thing that kind of affects the whole family and not just the person that gets it. It wants to take over the family's life. And so you kind of have to involve the whole family together. So it took a lot. I have my oldest daughter who has OCD and I have a younger daughter. She was affected greatly by not only my daughter's issues, but their relationship changed and our relationship change. So there was a lot of stuff we had to deal with.

: And one of the first parents to come to our parent support group was Kelly Anderson, who was a filmmaker. Right now she's Dean of Media Studies at Hunter College and it's like, five minutes after I met Kelly, she was like, I'm a filmmaker. I know there's a film in this issue, I just don't know what it is yet. And it took a little while. Our kids end up going to the same OCD camp later that summer. And one day they were coming home in the car ride and they were, my daughter, Vanessa and her daughter were having a very kind of adult discussion about their issues and things that they've lost and what things they've gotten over and how it works and the idea just hit Kelly, these kids know what they're talking about. They're knowledgeable, they're educated, we're just gonna sit them down and we're going to talk to them about OCD and we're going to get

their impressions and create a film that allows people to see the journey from how it affected me to how it affected my family to how therapy works.

Chris: And at the time, there really wasn't any media and or any film that kind of described that and gave parents and kids, you know, an idea of a, there's other people like me and B, there's a path to kind of get from a bad place to a good place. And we didn't want to show kids being sensationalized. It was just a, you know, they're talking from a position of empowerment and education. So that's how we got, I've got the idea to create UNSTUCK an OCD kids movie and it came out in 2017. It took about a year and a half to create it and interview the kids and edit it. And we were lucky enough to premiere it and be the keynote address at the 2017 International OCD Foundation Conference in San Francisco and we had all the kids from the film out there and it was a really good chance to kind of introduce the film to the community. And since then we've been fortunate enough to share the message throughout the world, whether it's via social media or visiting other countries or talking on podcasts like this. It's been really a great experience for us going from this position of not knowing anything, to being able to give back to people that helped us.

Debbie: That's fantastic. I love that story and yeah, I feel like OCD is one of those things that there are a lot of myths about. I think there's a lot of misunderstanding about what it actually is. It's certainly been something that people kind of offhandedly say, Oh, I'm so OCD, it's been sensationalized. Or it's been kind of the quirk of characters in certain media. And so could you even just as a way to take a step back, I'm sure that you have a great definition of what OCD is or you know, what, what actually is it, you mentioned it's a, it's a mental health condition. Say more about how it's defined.

Chris: Sure. Obsessions would be the things that were you concern you. They can be thoughts, urges, images that might occur in your brain that caused intense and severe anxiety. And then the compulsion's it can be physical or mental and, or I should say compulsions can be physical and or mental. And they're, the way you try to relieve the anxiety that's caused by the obsession. So that's why it's obsessive and compulsion with the obsession comes some kind of action ritual that you're trying to do to relieve that anxiety. And somebody with OCD that compulsion might temporarily get rid of the anxiety and it's becomes an action that you continue in repeat. And that eventually it usually grows and becomes more elaborate and can take over somebody's life. For example, my daughter has contamination, OCD, so it can be, it can take in different forms.

When she first started and OCD first was in our lives, she was fearful of poisons and she became afraid of certain trees on our block that had bottles next to them and she immediately thought those were poisonous. So she would you know, she would avoid them completely. There were clothes that she couldn't wear and then she would, you know, wash her hands. Sometimes she would constantly ask us questions, seeking new insurance that she's okay. And that was kind of her the obsession or the contamination was the issue. And then the compulsion was asking us reassurance questions, you know, am I okay? Am I right? Am I poisonous? Is this going to kill me? So it, to your point earlier about it being

misunderstood, a lot of people assume it's, you know, the, it's cleanliness or it's about being neat or you know, somebody who likes things tidy. And it's so much more than that and it takes many different forms and it's not anything, I guess the thing I would say, it's not anything you would ever wish on your enemy. It's painful. It's torturous. And you know, it's, it's not a joke. One of our friends that we've met through the OCD communities is you know, OCD is an adjective and it kind of allows you to kind of realize that, Oh, it's not something you want to put in place of. You think you're, it's not, I'm so OCD, it's, I'm so anal and so meticulous, I'm so organized and that's why it's, I think it can get misunderstood.

Debbie: I would love if you could tell us a little bit more about your process when you were discovering this was going on because I can imagine, I mean with my community of parents who are, their kids are in some way developing atypically right? There's something going on that they're not thriving. And so parents, I think when we're first confronted with this information, however it shows up, be it behavior or whatever, we have to go through our own process. Like, is this something that I need to attend to? Is this just my child being, you know, is this a conscious choice? Is this purposeful? Like what, or where is this coming from? And so could you take us back to that time in your life and, and what was your process like of recognizing, okay, this is, there's something going on here and there's something, this isn't a choice that my daughter's making, but there's something actually that we need to address.

Chris: Sure. I mean, everybody's story is different, but ours it was toward the end of third grade and school's almost over. And Vanessa hadn't really shown any issues. School is over. My brother who lived on the West coast was in for a week and we had taken her out to spend a week with my brother who was vacationing here. And I'm suddenly in the middle of the week we get a call. My brother's like, you know, my, my, my nephew had gotten a tick and you know, everything's fine with him, but Vanessa saw that and won't come out of the house. She's hiding from him. She's moving furniture, she's avoiding him. She's really scared. She's starting to ask all these questions. And so we just thought, okay, she got scared and we talked with her and we calmed her down and we thought, okay, everything's going to be okay.

You know, two days later we were all together as a family. Everything seemed okay and it just got progressively worse. Different things kept happening at school. She started being afraid of rocks. She started calling us in the middle of the day, you know, you guys, okay, I stepped on a crack in the street and I think I might have are you guys okay? Are you hurt? Constantly being on the phone and it wasn't just like a question. It was like questions that repeated over and over. We couldn't kind of talk her down from this anxiety and this heightened state and this heightened worry that she had. And we really didn't know what was going on. And fortunately for us she's very vocal and was telling us a lot about what was going on. And because we were her sounding board, we were aware of what was going on and she was aware of it. And one point she said, I don't like how I'm feeling. I'm scared. You have to get me help. Which I think was really, in hindsight, fortunate for us because we said, okay, we have to really take this seriously. It's not just she's going through a thing or having a panic attack or you

know, we have to take this seriously because she, you know, she's vocalizing it. And that really got us into action a lot faster to really start doing research, figuring out what it was, going to our pediatrician, asking friends. That's kinda really what kicked us into high gear as far as getting, finding out about obsessive compulsive disorder.

Debbie: Was it hard to find information? I mean, for so many of these differences that can be hard to just even navigate resources and finding the right therapist and support. So what was that like for you?

Chris: Well the Google machine as I'll joke, you know, Google was really helpful for us as far as finding books that we could read and at the time a few people who are doing videos on it. It was Really about, you know, what are the good books for kids and what are good books for parenting that at least tell you what obsessive compulsive disorder is, how it manifests in different ways, how therapy works, you know, explains a process called exposure response prevention or ERP and that kind of, by using research and kind of understanding that there were some books out there that we could read to Vanessa and she could read to other family members and that we could read. We started to learn more about it. And then once you understand that there's a bit of a treatment out there, then you start asking, okay, it's not, I don't just need a talk therapist or an art therapist.

Initially we got her into an art therapist. And another boast of luck for us was the art therapist said to us initially, I don't think I can help her. I think she has OCD. I'm not trained for that. I'll help you until you can find somebody that can really take care of her. And that was really fortunate for us because there are a lot of times where you might go with somebody and they don't admit to you they can't help or they just drag it on or so that really helped us. And then it just, a lot of hours manning the phones finding therapists that would train to treat OCD understood. It was, could talk knowledgeably about it. Honestly, interviewing therapists like we were hiring them for a job. And it seems weird to think that way when you're talking to somebody who's gone to school and is a professional and has earned a degree. But we started interviewing them, you know, and meeting with them and, and trying to get a feel for could they really talk the talk and really help our daughter. And we were fortunate enough to find somebody in Manhattan. So even in a city with, I don't, 10 to 15 million people, we still had to travel an hour by subway to find the right therapist at the time.

Debbie: And so you talked about treatment. So what is the typical treatment for OCD or the one that you found to be successful?

Chris: The kind of the quote unquote gold standard. The one that is most evidence-based is called exposure and response prevention therapy. It's a type of cognitive behavioral therapy where you're basically exposing yourself to the fear that you have and also kind of limiting and cutting back on over time. The compulsion's that you're doing. I mean, an example of ERP was my daughter who I mentioned before was was afraid of some trees on our streets. So it started with something very simple. Like we would we'll look at pictures of trees on the internet or we would watch videos of like a tree blowing in the wind or

something like that. Very low level anxiety. And we did that for awhile and then eventually we got to, okay, we're going to be at the end of the block and then we're going to be one step in the block and then we're going to be, you know, progressively getting closer and closer and doing things that caused a little more anxiety. And you're kind of habituating yourself to this anxiety, exposing yourself to the thing you fear and eventually your, your body kind of gets used to it and you're constantly kind of pushing yourself.

So in a lot of ways it's, it's hard as a parent to watch your kid because they are, it's not the, you instinctively parent, you know, go put the kid in front of the thing that they fear the most and then do it over and over and over again. And then when they are okay with something, you go, okay, we're going to take it a step further. And you're trying to retrain the brain. Sure. The person that OCD isn't telling the truth, they think they fear is not going to happen. And it takes for us, you know, that's one specific example. It took about nine months or so for, from us first starting with a picture on the internet to getting to the point where she's actually hugging the tree and totally okay with understanding that it won't cause her contamination.

Debbie: I'm just so interested in your family experience too. And your daughter. Yeah, I love how articulate she is and she obviously has, you know, in the film this incredible self-awareness and is so expressive and there is a conversation with her, I guess younger sister. Yes. I'm really interested in knowing more about that because again, I hear from so many parents who really struggle with the sibling dynamic and the toll that the difference can take on that relationship. So can you talk a little bit about that dynamic and where they are now and how you guys managed that?

Chris: Well, there were a few things that we were able to do as a family and OCD does want to take over the family. It, you know, Vanessa wanted all our time, and Charlotte, wasn't allowed to kind of get as much attention and she advocated for herself and said, you know, I want to be helpful. I want to help my sister. I want to be involved in what's going on. And she was six years old at the time, so little by little we would read books to her. But we, we kind of realized if we're going to tackle the same, we were going to do it as a family. And so we had our kind of little family mantra that you know, a family that fights OCD together can beat OCD together. So Charlotte would get involved in some of the exposures that we would do.

We used to try to make the exposures as fun as possible or as irresistible as possible. So we tried to do things as a family together. We would bowl for chemicals, you know, chemicals, we would contamination and could kill you. So we would bowl for them, we would at one point my daughter was afraid of certain foods. So it was like, okay, here's the thing. Normally I will tell you as a parent, you can't have a food fight, but with this certain food, you can have a food fight, you can mess up our entire house. And we would do that together. They threw food at us, we throw food at them you know, spray each other in the face with water, whatever it was required, and then things that we could do to make it fun. But it does hurt, you know, the sibling it's kind of like a side casualty to this

whole thing because they can be...their relationship has changed. There was times when Vanessa was afraid of her sister wouldn't go near her, which is heartbreaking and you know, they share a room together. So how do you manage that? It just took a lot of time and you kind of work with it. We tried to see OCD as an enemy and that everybody could look at as something that we can all tackle. And Charlotte was given the opportunity to ask questions. There was a couple times where she had her own sessions with my daughter's therapist where she could ask questions and you know, do what she could to kind of help and advocate for her sister and also participate in any way we that she could. But it certainly is hard to kind of navigate no matter what the issue is the sibling dynamics and how you can make time for both.

And you know, I'm not saying we do it perfectly because there definitely still are issues that we have to deal with. But you know, we tried to give our youngest daughter Charlotte as much attention and you know, become a part of the process as much as possible. And you know, that that was it's a big point in the film when they're kind of talking, she talks about how, you know, it affected her and their relationship. And we have met with other therapists who do have siblings and so we've kind of launch a page on our website that does talk to siblings and does kind of talk about ways they can help. And it is kind of a thing that we are trying to do more of and, and, and help more, more families understand how to integrate parents as well. This past summer actually I know I'm droning on and on, but we actually, for the first time at the OCD conference we actually had three or four siblings specific events where only siblings were allowed and siblings could talk to each other and meet each other. And I think that was a nice bonding experience for them.

Debbie: Yeah. And I know that as a parent too, it must be really tricky to, to navigate that. I mean that's what I hear from so many parents is feeling just daunted by the task of trying, you know, they're, they're so concerned about maintaining the integrity of that relationship or the health of their children's relationship with each other and then recognizing like, wow, we're putting a lot of effort into, you know, accommodations or support or a therapy for this one child and the other kid is getting the shaft. And I'm just wondering as a parent and with your partner, like how has that been for you and how have you supported yourself through that?

Chris: I mean, it certainly tests a relationship. My wife and I you know, there were certain nights would whatever happens with work or the day it was like, ah, I can't deal with this. You have to deal with this and you, you've kind of tag team in and out and who can handle it and has the mental capacity to deal with whatever's going on at the moment. It is a lot of work and effort. It requires intense amount of communication. But there's certain things that I think we just early on that it wasn't a sprint, it was a long-term thing and that kind of helped give us perspective to know that we're not going to be perfect every night. It's going to be a lot of trial and error and you know, we'll find things that work and we'll stick to those.

And when those things don't work, we'll find something else. So when you're realizing that it might, it's not a quick fix, there's not like a shot and you can get or a book you can read and everything's fine. It's a process that it helps you kind of go, okay, this worked, this did, let's try this and understand that it's something that you're working with over time so you don't have to rush it and you keep going. You stick with, you know, a plan and part of that is making time for other siblings, making time for yourself. My wife, you know, I would be like, I'm going to run. I wanted to make sure I kept doing that. My wife would sometimes get massages, things you could do to do your own self care, as well as be like, okay, we're going to take your sister to a movie if you don't want to come, you know, we'll figure it out. But giving each person their own time as much as possible, even if that's just a half a block walk to the store to get ice cream.

Debbie: That's my favorite kind of self care right there. So thank you for, for answering, that was a personal question, but I appreciate you sharing that. You know, this is where my people are. It's where I am. And so I just think it's really validating to hear that we're all kind of going through this and it's hard.

Chris: Yeah. Oh, no doubt. And you think it's hard to do, like something happens and you immediately go, Oh my God, what is this going to mean about the future and school and college or jobs and how are they going to be a functioning adult? But then the reality is like, it's all about get through today, get through tomorrow. And you know, my wife and I, you know, would sometimes say to each other the future is tomorrow's problem. You know, let's get through the moment. The future is maybe a week away or a month away when things were really bad, it was like, okay, we've got to buckle down. And some things like that can help you get through those tough times and you realize that's not a problem that I have to deal with. I gotta deal with, you know, there's bigger issues that we have to worry about. And having that perspective can help.

Debbie: Yeah. I always say it's not even just taking it week by week or day by day, but sometimes it's minute by minute and that you can only focus on what's happening right now. Yeah. Yeah. So I'd love to just switch gears for a few minutes and talk a little bit more about the, the kids that you featured in the film. I'm just wondering, they were all incredible and I just really appreciated hearing their perspective and I appreciated the approach to storytelling and just really letting them speak their truth and share their experience. So I'm wondering what was that experience like for them and how do they feel and how does your daughter feel about, about her story being out there and sharing this to support other people?

Chris: I have to give a shout out to all the kids and their parents for understanding in some of them, you know, were wanting to jump in and help right away. And some of them were very reluctant to help. But all of them realized that, you know, by sharing their story, they could help other kids because they had all been to a place where they were lonely and realize that there's an incredible amount of loneliness that comes to him. Nobody else goes through this. I, you know there's nobody else. There's no other kid that has to deal with this. And they all understood that by telling their story that they could make a connection to



another family, help another kid they could further somebody else's process and not let somebody go through the same thing they did. So I think they all eventually realized that this was a good thing and it was, it took a process to interview them.

We, we, we were part of a few Facebook groups and some online email networks that we all eventually, and a lot of therapists help us find the right kids, interviewing them, making sure they understood and could talk about what they were going through in an insightful way and an educational way. And it was wonderful to see them when we premiered the film to have them all get on stage and get that standing ovation from the crowd. And then they signed autographs afterwards so they had their little Oscar moment, which was wonderful. And then afterwards we've had them, actually, a lot of them have spoken at different events whether it was people flying us in for events or them being asked to do podcasts or their own screenings. So they've all become little advocates here or there and you know, it's not like I'm, I don't want to make it seem like they don't still have issues because OCD is something that can pop up.

And it is sometimes like whack-a-mole where one issue's gone and something else completely different pops up. But they all I think have realized that their story has helped others in their, you know, in some ways, Arielle who was probably the hardest person that convinced to be in the film ended up being somebody who was starting her own groups at the end and actually calling us saying, Hey, what are the other events I can get involved in? So it's nice to see that happen and hear their stories. I learned from them so much, not just them, but the other kids I've interviewed and just learned so much. They're all wise and they all have a good story to tell and different situations. And so I, I just continually learn from them. So for me it's, it's constant education when I talk to any kid who's got OCD or been through or going through whatever issues they have.

Debbie: That's awesome. So cool. So if there are parents listening to this episode and they are, you know, I know that OCD can also show up with anxiety or Tourette's or with other things. And if there are parents who are listening who suspect this may be going on, what would you recommend would be the first thing that they do?

Chris: I mean I would say if you think it's OCD do research that's your first first line of defense, figure out. You know, what are symptoms to look for. There's a lot of resources out there, whether it's charity organizations or personal blogs where you can kind of get a good outline of what to look for and things you, behaviors you might be seeing and then call around and find a therapist that will there's a test called Yale Brown Obsessive Compulsive Disorder Scale. That's basically that's the assessment that a therapist will do for your child to figure out if it's OCD. And that's kind of the steps that you have to take. And once you get the diagnosis, you want to find a therapist that will work with you. I think for, for younger children, ERP and definitely I think some younger teenagers, ERP can be something where you'd start with another or other types of treatments that you

can try. But the first line of defense is getting educated about it, finding resources that can help guide you to understanding and getting a diagnosis.

Debbie: Awesome. Thank you. So I want you to share where people can connect with you and find the film or if you have screenings and things, but is there anything that I didn't touch upon that you would want to make sure that we share in this episode?

Chris: Yeah. well first thing, please go see the film. It's OCDkidsmovie.com. We have not only you can stream the film there, but you can, we have a resources page. We can give a screening page where we might have some screenings, we have a sibling page. So we try to put as much stuff on the site that can help further your parental education or even help your kids as much as possible. So that's OCDkidsmovie.com. We also have the film translated in five different languages. So you know, Spanish, French, Portuguese. We had a therapist from Greece reach out to us. So we had to translate it there. Russian, lots of different ways that we're trying to get it out there. So that would be the first thing. Then we also, I've done 19 hours of interviews since the film with other kids from different countries and different parts of the U S who have OCD.

We have a YouTube page which you can watch all of those and get insights from kids themselves and hear about their struggles. And then there's also a conference that I created called OCD Construct and it was four hours of talks from therapists that you can stream any time. And it kind of goes through the process of how it was, what is OCD, what are intrusive thoughts, what's ERP, what's had his medication work and then how, you know, help with parenting. So those are, I would say three main things are OCDkidsmovie.com our OCD Kid movie YouTube page, and then OCD Construct are three resources can help get you started.

Debbie: Awesome. And listeners, I will have links to all of that on the show notes page too. So be sure to check that out and check out those awesome resources. I get so excited when I talk to guests who, who have just gone all in, you know, who've created what they needed and in support of others. And it's so exciting to hear about all these resources and the YouTube channel and super generous and awesome. So just a shout out to you for doing that. And thank you so much for again reaching out to me and for coming on and sharing this. I know that this is something that impacts a lot of our families, so I really appreciate the conversation.

Chris: Thank you. And I just want to say to all of your listeners. You are not alone. Your kids are not alone. Your best job is to advocate and be their cheerleader. And when it comes to OCD, you know, it can be scary and frustrating and you might fear for your kid, but things can get better and there is hope and don't, don't ever lose that. And thank you so much for having me on. This was fantastic.

Debbie: You're so welcome.

**RESOURCES MENTIONED:**

- **UNSTUCK: An OCD Kids Movie** (Available with Spanish, French, Russian, Greek, Portuguese subtitles and an audio description)
- **UNSTUCK on Instagram**
- **UNSTUCK on Facebook**
- **Get UNSTUCK From OCD Facebook Group**
- **OCD Kids YouTube Channel**
- **OCDeconstruct Conference**
- **International OCD Foundation**
- **Yale-Brown Obsessive Compulsive Scale**