Two-Way Mirror: Facing a Daughter's O.C.D.

ce a week, my daughter Lucy and I take the F train from Brooklyn to see her doctor on Park Avenue. The offices are lush and airy; children flop on the colorful couches or surf the net on Macs. We rarely have to wait long. My own psychiatrist usually has at least five twitchy people in his vestibule at any given time, and he sees them for 10 minutes, tops. Lucy's appointments are 45 minutes, and most of them run longer.

When she was 8, Lucy started humming and could not stop. I have struggled with depression and bipolar disorder for most of my life, so I knew there was a good chance my children might inherit some form of mental illness; a neurological condition like Tourette Syndrome wasn't even on my radar. I was relieved to learn that mild cases of Tourette's are treatable with behavioral therapy, and some children even "age out" of their tics completely.

One year later, the condition had started to seem like just another one of Lucy's activities: tae kwon do, filmmaking, ice hockey. Then one night, just before her bedtime back rub, she whispered that she had something to tell me. "What is it, bunny?" "You know how Ella Enchanted had to do things even if she didn't want to? Sometimes I feel like I have to do things, too." I tried not to panic. "What kind of things?" "I have to count things. Or line them up. I feel like if I don't do that, something bad will happen." "What will happen, sweetie?" "Something bad," she repeated firmly. "To you or Daddy."

I knew immediately that Lucy was describing obsessive-compulsive disorder, or O.C.D., a condition that often arises gside Tourette's. Her allusion to Ella Enchanted, a character in a contemporary fairy tale who must do anything she is told, suggested that she knew her fears weren't "real." At the same time, they were obviously bothering her to the point where she needed to ask for help — something Lucy usually hated to do.

I called the doctor the next morning and he fit us in that afternoon. We had barely exchanged greetings when his florescent office lights revealed something else I hadn't noticed. "Honey, what happened to your eyebrows?" Lucy is blond and her eyebrows are even blonder, which I guess is why it took me so long to notice that they were almost gone. "I pulled them out," she told me. I started to feel sick.

In response to her doctor's gentle questions, Lucy described a set of behaviors and associated fears. Objects needed to be in order to protect me and her father from unspecified deaths. The sliding mirrors on the bathroom medicine cabinet had to be lined up just right, or a witch would jump out of the wall. She had to be sure her dolls' eyes were closed or her stuffed animals' faces turned away when she went to bed, or they might kill her in her sleep.

You'd think that a mother with 25 years of psychiatric treatment behind her might handle a child's mental illness better than a terminally-sane parent, but that was not the case for me. I have experienced hypomanic episodes and debilitating depressions, but I have never pulled out my hair or believed that the safety of my loved ones relied on the position of my pencils. I had hoped that, if my daughters ever experienced depression or mania, I would be there aide them and make them feel safe. But Lucy's disorders were new and frightening to me, and I had nothing to offer.

Lucy didn't seem afraid; she seemed genuinely relieved to have shared her anxieties, and eager to address them. Clark, her doctor, gestured toward his desk, which was a mess. "See those papers?" he asked Lucy. "Do you want to straighten them?" Lucy shrugged. "A little." "Between 1 and 10, how strong is your urge to straighten those papers?" I Tourette's-talk, the feeling that creates the need to tic is called an urge. When Lucy feels a tingle in her throat telling her to tic, she is supposed to begin a "competing response," or a non-tic behavior, that she practices until the urge subsides. In this context, however, Clark seemed to be trying to incite the urge instead of abate it. "Maybe a 2 or a 3." Clark gathered the papers and, watching Lucy intently, dropped them on the floor. "How about now?"

Lucy pointed to the paper closest to her, on top of the pile. "What I really want to do is scratch that one." "O.K., let's work on that. Hold your finger directly above the paper, but don't scratch it." "I have a question," I began, but, Clark cut me off. "Hold on a second." He positioned a timer on his desk so that it faced him. "Lucy, how strong is the urge?"

I couldn't see Lucy's face; she was sitting cross-legged on the floor, dangling her finger over the paper. "It's a 9." I stared at her. Nine? In all the time we'd been working with Clark, she'd never had an urge this strong — or, as far as I was concerned, this weird. "Good! O.K.!" Clark leapt up and began to graph her responses on a whiteboard. Finally, he acknowledged me. "Mom, you had a question?" "Yes." I gazed at Lucy, who was still focused on her finger. "I can understand why it's a problem if Lucy's afraid of the bathroom mirror. But is it really such a big deal if she wants to scratch a piece of paper?"

Clark turned to Lucy, as if she'd prepared remarks on just this topic. "Lucy, do you know why this is important?" I Lill couldn't see her face, but I heard her loud and clear. "It's not only the paper, Mom," she told me. "Sometimes I want to scratch the blackboard at school, or people's coats." I thought, not for the first time, Why didn't you tell me? But I didn't say anything. "How strong is the urge now?" "Still 8." Lucy plucked at her eyebrows with her free hand. How had I never noticed that before? "Try not to touch your face," Clark said gently. She stopped with her eyebrows and started chewing on her wrist. I tried to make a joke. "Eating your hand won't help," I told her.

"It distracts me," Lucy responded, in an unfamiliar voice that sounded both wise and tired. She still didn't look at me. It hit me that, for her, I wasn't actually there — not in any useful way.

Unlike Lucy, I never associated my anxiety with any behaviors or numbers. My fear seeped and rose like dark, relentless water; because it was attached to nothing, nothing could make it stop. What the doctors called "anxiety" didn't feel like anxiety to me. It felt like terror. Clark must have been listening to me more closely than I thought, because he took me into an adjoining room. There, I could cry without upsetting Lucy, who I watched through a two-way mirror gripping her own hand as if trying to cling to someone who was trying to leave.

In a way, I envy Lucy's anxiety, its organized concordance of fears and behaviors. If my doctors had asked me to assign my anxiety a number between 1 and 10, I would have said a thousand, a million, infinity. Perhaps O.C.D. will shield her from the shapeless dread that characterized my own depression. Perhaps she — we — are lucky after all. Clark says something funny through the intercom, and Lucy laughs. The urge is still an 8. "You're doing great, sweetie," I tell her. "I know it's hard." Lucy smiles into the mirror, right at me. She knows I'm there.