Mothers are gradually getting better at sharing their struggles, asking for help and showing support

The truth about PERINATAL OCD

IT'S A CONDITION SUFFERED BY MANY WOMEN BEFORE AND AFTER THE BIRTH OF THEIR CHILDREN, BUT WHAT IS IT AND WHAT CAN BE DONE TO HELP? Rhiane Kirkby FINDS OUT

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cent of the population have OCD at any one time, but in the year after giving birth, two to three per cent of mothers are affected. Dr Sarah Healy, a clinical psychologist who specialises in treating both men and women in the perinatal period, says the increase in OCD at this time is understandable. "There's a huge sense of responsibility that comes with being a parent, and it's very normal to find yourself worrying about the wellbeing and safety of your baby. Some people become overwhelmed by these terrifying thoughts and will do anything to keep their baby safe."

Sarah says mothers with OCD often fear they're going to drop their baby down the stairs, burn them in the bath, smother them with a pillow or poison them. Thoughts and images which are, by their very nature, extremely distressing. "People with OCD don't become violent or act on these thoughts," Sarah explains, "they retreat and avoid the situations they fear will trigger them."

Avoidance is something Emma knows only too well. "I avoided public toilets, the tube, subways, parks, the cleaning product aisle at the supermarket, motorways, restaurants and even hotels. I soon became too scared to even go out at night."

For Emma it was a daily battle to keep going. "I'm not really sure how I did it; I certainly didn't make things easy for myself, but I kept going because I didn't really have a choice. My son needed me and I needed to be the best mother I could possibly be," she says. "I'd achieved everything I'd ever wanted — a great career, a loving husband and a longed-for, healthy child. Life was good, but I was terrified it would slip through my fingers."

Like most mental health issues and especially those which occur before, during or after child-birth, there's a massive stigma attached to OCD. In Sarah's experience, "lots of women feel ashamed, they think they shouldn't feel like this," she explains.

"That was the worst thing," says Emma, "not being able to talk about what was going on in my head. Deep down I knew the thoughts were irrational, but when a voice keeps telling you you've put bleach in your baby's milk, you start to believe it." Happiness coach, Olivia Horne, who herself suffered from mental health issues following the birth of her first child, believes, sadly much of this stigma seems to be between women. "We're exhausting ourselves trying to show the perfect picture of motherhood to the world."

Olivia, does however, believe things are changing, "we're getting better at asking for help and showing support and solidarity, but there's still a lot of work to be done." Sarah agrees. "More people are opening up about their difficulties and I hope that with celebrities, such as Adele, speaking frankly about their struggles, this trend will continue."

Thankfully, the government has also started to listen. In November 2017, it was announced that NHS England would spend £40m on specialist mental health workers in a bid to help 30,000 more women by 2021. The funding meant that Sarah could finally help Emma overcome her OCD. "Sarah used cognitive behavioural therapy to help me help myself. By talking about my issues and helping me to face my fears, she gave me a way out of this vicious cycle of anxiety. I learned that stress and tiredness were a big trigger for my OCD and in doing so, felt much more able to cope. To say that she changed my life would be an understatement." Sadly, Emma is one of the luckier ones. The National Childbirth Trust says that whilst the new funding is welcome. there's still a very long way to go to help the 140,000 mothers each year who suffer mental health issues in the perinatal period. Until then, the advice is to keep talking, start listening and stop comparing.

IF YOU'RE WORRIED ABOUT MENTAL HEALTH ISSUE YOU SHOULD:

- Speak to your GP or midwife
- Self-refer at your local IAPT service
- Recommended self-help book: Break Free from OCD, £8.33 by Dr Fiona Challacombe, Dr Victoria Bream Oldfield and Paul M Salkovskis (Amazon)
- Find a support group: PANDAS
 Foundation UK, OCD Action, OCD-UK, pandasfoundation.org.uk, ocdaction.org.uk, ocduk.org

afternoon and Emma's standing in a maternity examination room in the local hospital, hugging a large needle disposal box. One of those big yellow boxes with 'Danger! Dispose by incineration' marked on the front. It's not normal behaviour for a mother of two young children, but for Emma it was something she had to do if she was ever to break free of OCD.

t's two o'clock on a Tuesday

She had suffered with low-level OCD throughout her 30s, but when she struggled to conceive and then became pregnant with her first child, it reached crisis point, "ruling every move and dominating every thought."

For Emma, needles were her biggest fear. "A fear I'd managed – or so I thought – to keep under control until I became pregnant, when I suddenly couldn't walk down a street without looking for them, dreaded going to the doctors or hospitals" she explains.

And for Emma it didn't end there, "something as simple as preparing my baby's bottle left me in a cold sweat, I cleaned everything over and over and my hands were raw from incessant washing. It was no longer just about needles – germs, strangers, salt, eggs, cleaning products and cars too." She goes on to tell me how she routinely made her son's meals three or four times, throwing each one away for fear she'd done something to contaminate it.

Emma's experience may sound extreme, but it's not uncommon. The Royal College of Psychiatrists estimates that around one per