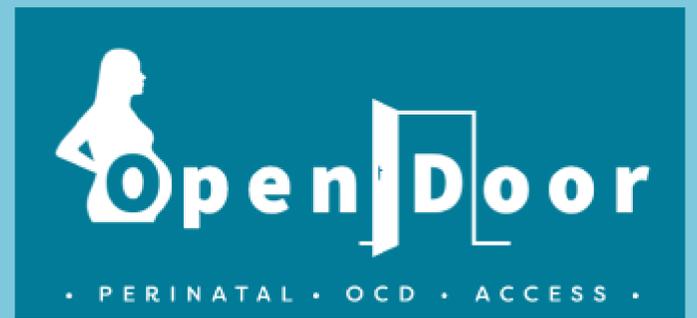


# ACCESS TO SERVICES FOR PERINATAL OCD



Intrusive thoughts are common in the population, however form the basis for obsessive-compulsive disorder. The perinatal period can make parents vulnerable to experiencing mental health problems [1]. However, perinatal obsessive-compulsive disorder (POCD) is **under-recognised** and **under-diagnosed** [2], despite effective treatments being known [3]. It's important for us to understand the experiences of those who have and haven't used services in order to increase access.

## AIMS

To develop a nuanced understanding of the experiences of those who **self-identify** as having experienced POCD, including identifying any **barriers and facilitators to accessing psychological support** in the South East of England. This includes aiming to understand **how individuals recognised symptoms**, if they accessed support and whether they were **satisfied** with their treatment.



## CO-PRODUCTION

**Five experts by experience (EBEs)** have been involved throughout the study, through group, and 1-1 meetings as well as through emails. EBEs have been involved in the following:

- **Co-creation of all participant facing materials** including; the recruitment poster, topic guide, signposting document and PIS.
- One EBE became the **recruitment 'lead'** and ran the social media accounts.
- Three EBEs have been **trained** to conduct interviews.
- EBEs will also be trained and involved in the **thematic analysis** and **dissemination** of results.



## DESIGN

Semi-structured interviews are being conducted **by the PI and three EBEs**. **10-25** individuals who self-identify as having experienced POCD, **or are close to someone who has**, will be sampled.

The whole time I was asking for that help, I was like blaming myself thinking, this is just me not coping with the anxieties of pregnancy and every woman feels like this, but they've got better coping mechanisms

## APPROACH

The NIHR INVOLVE co-production guidelines are used including their **principles of sharing power and respecting others' knowledge**. **Flexibility** is a key feature of the approach taken. **Ways of working** were decided among the co-production group. The approach values EBE's knowledge and perspectives, in order to move away from the **"us vs them"** and **"unwell patient"** discourse. As a result, **remuneration** for all EBE time is important.

[I] feel like [my child's] babyhood and early years have been snatched from us

It was almost like if you haven't got postnatal depression, then what do we do?

## OUTCOMES

Currently, we are still recruiting and conducting interviews as informational power has not been reached. As POCD is under-recognised, this is a hard-to-reach group so **recruitment has been challenging**.

It has been **exciting** to working with the EBEs, as they have developed the project by providing **invaluable insights** and furthered the PI's understanding of POCD.

This study will contribute to the research field as there is **limited research** on POCD, and no study has identified barriers and facilitators to accessing services. The results from this study will be used to **co-produce a toolbox** for future services with healthcare professionals and EBEs.

