

For When

you have postnatal anxious and intrusive thoughts

Postpartum Obsessive-Compulsive Disorder (OCD)

Do you have thoughts that come into your head that are intense, intrusive, powerful, unwanted and distressing?

Perhaps the more you try to push them away, the worse they may become. They may be the total opposite to what you want to do, your values and how you normally act. This can make them even more distressing and seem impossible to talk about, shameful to have and scary. As a new parent, these thoughts can make you feel very unsafe and fearful.

Up to 8% of women during pregnancy report symptoms of OCD. This can increase up to 17% postnatally and is often misdiagnosed as postnatal anxiety. Though more common in women, it is also seen in men.

If you have experienced OCD or anxiety prior to pregnancy, it may present very differently after having a baby, with obsessions and compulsions surrounding your baby.



Postpartum or perinatal OCD could look like:

- **Obsessions** – All-consuming, unwanted thoughts that come into your head that loop around and around. It could be thoughts you are going to harm your baby, extreme thoughts around being an unfit parent or experiencing mental images of something terrible happening.
- **Compulsions** – repetitive behaviours, rituals or mental acts to reduce the anxiety around the obsession/thought or prevent something bad from happening. It could be avoiding your baby, checking your sleeping baby constantly, repeated cleaning, continual overthinking, thought suppression or seeking excessive reassurance from others or the internet.

Speaking up about these obsessions and compulsions can help with the confusion, distress and shame you may be feeling.

What can you do?

In the moment, to reduce your distress, you can:

- Be kind to your mind – talk to yourself as you would a friend
- Allow acceptance of your thoughts. Having them does not mean something will occur.
- Remind yourself these thoughts will pass and they do not define you
- Do something with your body to shift attention – e.g. exercise, stretch



When to get help?

These obsessions and compulsions can be very difficult to manage without professional help. It may be good to get help:

- When you are mentally exhausted by experiencing or trying to manage your thoughts and your distress
- When they stop you doing caring activities for your infant like bathing or changing their nappy because of your thoughts
- When you struggle to look after yourself beyond the bare essentials
- When bonding with your baby is affected because you are avoiding caregiving activities with them
- If your thoughts include harming yourself, your baby or someone else

What help is available?

- Factsheets to understand what is happening and to explain it to others
- Professional help is available. Start by speaking with:
 - Your GP
 - Your child and family health nurse or your Aboriginal Health Worker
 - Your midwife or obstetrician

Contact ForWhen to help navigate you to the right mental health services and supports.

1300 24 23 22

Mon-Fri
9am – 4.30pm

  @ForWhenHelpline



forwhenhelpline.org.au

ForWhen is funded by the Australian Government.
ForWhen lived experience consumers co-produced this resource. © ForWhen, 2026.

We acknowledge the Traditional and Continuing Owners of the land and waters of Australia, and we pay our respects to Elders, past, present and emerging. We pay tribute to the wisdom, richness, diversity and resilience of First Nations peoples and cultures.

