

Obsessive Compulsive Disorder (OCD) is a long-term mental health condition where a person has obsessive thoughts and compulsive behaviour. Typically, this condition begins early in adulthood and the onset of symptoms is normally gradual.

People with OCD can experience recurring obsessive thoughts, which can be highly unpleasant and distressing. They may engage in compulsive behaviour to manage these unpleasant emotions. Frequently, they are reluctant to disclose

their condition, which can lead to people suffering in silence and affect how they function in both their personal and working lives.

Once diagnosed, treatment (for instance talking therapies or medication), is usually necessary, and can be very effective. There are other conditions closely associated with OCD, such as anxiety, depression and body dysmorphic disorder (BDD).

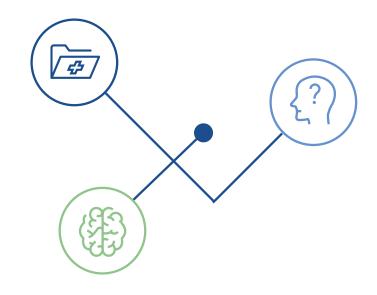






Key Takeaways

- It's estimated that around 12 in every 1,000 people in the UK are affected by the condition
- OCD can affect anybody, regardless of age, gender or background
- It has not become more common over time
- The pandemic has made life more difficult for many, but not all, sufferers. It should also be noted that the pandemic has not 'caused' more people to develop OCD



- > Typically, this condition first starts during early adulthood and the onset of symptoms is normally gradual. Those over the age of 35 will rarely develop symptoms
- > As the name implies, there are two key elements to OCD: obsessions and compulsions
- > People with OCD can experience recurring obsessive thoughts, which can be highly unpleasant and distressing, and sufferers may feel the need to carry out compulsive acts to manage these unpleasant emotions
- > About half of people with OCD will be severely affected, while fewer than 25% experience the condition mildly
- > OCD can be very disabling. The World Health Organisation (WHO) includes OCD among the top 10 causes of disability worldwide, in terms of lost earnings and reduced quality of life
- > Sadly, they remain a leading cause of hospital admission and death in young people.
- > There is a significant stigma around OCD, leading many to suffer in silence
- > Families and colleagues can be directly impacted by the effects of OCD
- Once diagnosed, treatment, which may include talking therapies or medication, is usually necessary, and is very effective. Talking therapies can include Cognitive Behavioural Therapy (CBT) and Exposure and Response Prevention (ERP), medication or a combination of these
- > The disability provisions of the Equality Act 2010 are likely to apply to sufferers



Condition overview

OCD is often misunderstood and is commonly associated with behaviour like overzealous handwashing, or an insistence on things being neat and orderly. According to one sufferer:



One of the most difficult things about OCD is how people perceive it. Intrusive thoughts and compulsions take a great toll, yet people don't seem to understand that. Anyone who thinks that having OCD is 'helpful', couldn't be further from the truth.

The thoughts (obsessions) recur incessantly and repeatedly, which can disturb a sufferer's concentration. These thoughts are unwelcome, frightening and disturbing, which can make them difficult to discuss with anyone.

In some cases, obsessive thoughts can include violent imaginings of harming oneself or another person, which can also disturb the sufferer. In addition, they may be concerned that they may have failed to prevent harm in the past, or may harm another person in the future. Obsessive fears may include contamination, or the belief that something

negative will happen if a specific sequence or order isn't followed.

Perhaps inevitably, sufferers take actions to reduce the unpleasantness caused by the obsessive thoughts, which are known as compulsions. Many compulsions don't make much sense, or can be time consuming, but the sufferer will feel compelled to do them. Common compulsions include repeated handwashing (even to the point of damaging the skin), arranging things in a specific way or order, checking door locks, and checking the route to work.

OCD at work

Many of those suffering from OCD may remain highly functional at work, despite suffering from symptoms - while for others the impact can be major.

People with OCD may:

- > take longer to do their work, due to intrusive thoughts
- have difficulty concentrating
- > avoid certain people or tasks because they trigger negative thoughts
- > constantly worry about how co-workers perceive them and their behaviour
- > avoid particular rooms or situations, due to contamination fears



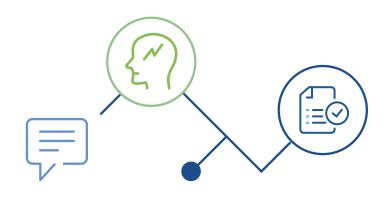


What can I do as an employer?

There are a range of supports and adjustments that can be very helpful within the workplace, and some are very straightforward.

Some general guidance includes:

- > If an employee approaches you to talk about their mental health, have an open, honest and practical conversation with the person about how their condition impacts their work and what adjustments can be made
- > Ask the individual what they need they are often the best experts of managing their condition
- > Focus on what the person can do not what they can't
- > Tailor adjustments to the specific needs and abilities of the individual - be creative
- > Be flexible OCD can fluctuate in severity over time. It may be helpful



- > to agree adjustments that can be implemented when required and reversed at other times
- Regularly review the adjustments to ensure they are working and are still appropriate
- If appropriate, and only with the permission of the individual, consider communicating the adjustments to other team members so they are aware, and consider whether there is a need for wider education within the team regarding the condition.
- > Take advice consider referring your employee for an occupational health assessment, for clinical guidance and support

Some more specific examples of adjustments to consider may include:

- > Flexible hours difficulty getting to work on time can be a common problem
- > Allowing additional time to complete certain tasks
- Provide access to a workspace that isn't shared with others and/or working from home
- > Allow flexibility regarding time off to attend medical/therapy appointments
- Encourage frequent short breaks
- > Stress can exacerbate OCD, so monitor and address workplace stress
- Consider options to phone into meetings and provide permission to leave group situations without having to ask

Resources

- > Learn about OCD
- Employing people with OCD
- > MIND OCD information and support
- > MIND taking care of your staff
- 1NHS inform Scotland







