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Request for Bridge Funding

I am one of a small number of perinatal psychologists in Canada and a global leader in the area of new mothers' thoughts of infant-related harm. My CIHR-funded research program focuses on perinatal anxiety disorders and epidemiology with an emphasis on prevalence, screening and access to evidence-based psychosocial interventions. My primary research focus is in the area of new mothers' thoughts of infant related harm is motivated by a desire to: (a) reduce the stigma associated with these thoughts, (b) reduce the risks to women who disclose they types of thoughts, and (c) improve access to treatment. The stigma surrounding these kinds of thoughts is particularly acute for indigenous women where child removals are common. In parallel research programs I focus on fear of childbirth, screening and cognitive behavioural therapy for perinatal anxiety. My overall objective is to provide evidence-based information to women, their families and maternity care providers to improve the mental health and wellbeing of perinatal women and their families.

I am a British Columbia (BC) native and deeply committed to enriching the health of women in BC. My current academic position ends on October 31, 2019. I am seeking support for my highly-productive program of research. I am seeking up to a maximum of \$110,000 per annum (gross, possibly from up to three to four agencies), for a minimum period of one year.

Below, I outline my short-term scholarly activity plans during this bridge funding period with a focus on journal submissions, data collection and funding applications. Additional information on my public and conference presentations and trainee supervision can be found in my CV (attached).
References are provided on the final page.

Thank you very much for considering my request. I look forward to hearing from you.

Sincerely,



Nichole Fairbrother

PERINATAL OCD AND NEW MOTHERS' THOUGHTS OF INFANT-RELATED HARM

I am the principal investigator on the first large-scale ($N > 600$), prospective assessment of maternal thoughts of infant-related harm, OCD and child abuse. This research was funded by the Canadian Institutes of Health Research (CIHR; \$153,677/yr; 2012-2019). We have begun data analysis for the first three manuscripts to arise from this work. The study protocol is published in *BMC Psychiatry* (Collardeau, Corbyn, Abramowitz, Janssen, Woody, & Fairbrother, 2019). In this area, I have also co-authored two book chapters on postpartum OCD (in the *Oxford Handbook of Perinatal Psychology*, 2016; and the *Clinical Handbook of Obsessive-Compulsive Disorder and Related Problems*, 2007), and have developed a cognitive-behavioral model of early, first-time parenthood as a time of increased vulnerability to OCD (Fairbrother & Abramowitz, 2007).

TWO-YEAR PLAN

Manuscript submissions:

Fairbrother, N., Thordarson, D., Collardeau, F., Corbyn, B., Woody, S., & Wolfe, D. (Submission: Oct 2019). New mothers' thoughts of infant related harm and their relation to harming behaviours. *The Lancet: Psychiatry*.

Fairbrother, N., Thordarson, D., Collardeau, F., Challacombe, F., & Woody, S. (Submission: Oct 2019). Perinatal OCD prevalence and incidence: Relation to harming obsessions. *Journal of Clinical Psychiatry (Focus on Women's Mental Health)*.

Torok, D., Collardeau, F., Frizzo, C., & **Fairbrother, N.** (Submission: Spring 2020). Attachment functioning among perinatal women suffering from obsessive-compulsive disorder. Journal: TBD.

Fairbrother, N., Collardeau, F., Woody, S., Thordarson, D., & Janssen, P. (Submission: January 2020). Cognitive and personality predictors of perinatal OCD. Journal: TBD.

Fairbrother, N., Collardeau, F., Woody, S., & Thordarson, D. (Submission, Spring 2020). The prevalence and course of new mothers' thoughts of infant-related harm. Journal: TBD

Data collection:

We are currently conducting an Island Health funded (\$40,000; 2017-2019) online study of new mothers' thoughts of infant-related harm and their relationship with OCD, child abuse, attachment and separation anxiety. Our primary objective in this work is to improve our understanding of the relationship between harm thoughts and child abuse. To date, no relationship between unwanted, intrusive thoughts of harming one's infant on purpose has been found. In our most recent study, women who reported these thoughts were in fact, slightly less likely to harm their infant. However, sample sizes for this work are $N < 500$. In order to detect very small differences, a much larger sample is required. Consequently, we are replicating this work via an online survey. Over the next two years we will collect data from approximately 1,200 women. This will allow us to explore some of our research hypotheses and continue data collection until we reach $N > 3,000$ allowing more precise estimates of the relationship between these thoughts and child harming behaviours.

Funding applications:

This fall (2019), we submitted a planning and dissemination grant application to the CIHR for funding to support the development and dissemination of an animated educational video about new mothers' thoughts of infant-related harm and their relation to OCD. The intent of the video is to educate pregnant and postpartum women, and their families about these types of thoughts with a view to reducing the distress associated with these thoughts and the risk of OCD among vulnerable women.

UNDERSTANDING FEAR OF CHILDBIRTH

In a parallel of inquiry, I am investigating fear of childbirth. Fear of Childbirth affects 1 in 5 women and is associated with adverse psychosocial and obstetrical outcomes. Existing measures are poor screening tools and fail to assess key aspects of women's childbirth fears. In collaboration with investigators in the UBC Division of Midwifery, I led the development of a new measure of fear of childbirth (the Childbirth Fear Questionnaire). I successfully applied for funding (Island Health; \$49,925; 2016-2017) to conduct a study of the accuracy of the Childbirth Fear Questionnaire as a screening tool for specific phobia, fear of childbirth. Data collection is now complete (N > 700), and we are nearing completion of data preparation.

Two manuscripts from this work have been published (Stoll, Fairbrother, & Thordarson, 2018; Fairbrother, Thordarson, & Stoll, 2018). The psychometric development paper from this and a subsequent sample is currently being prepared for submission to *Psychological Assessment* (Fairbrother, Thordarson, Stoll, Collardeau & Sakaluk) in June 2019.

TWO-YEAR PLAN

Manuscript submissions:

Fairbrother, N., Sakaluk, J., Collardeau, F., Thordarson, D., & Stoll, K. (Submission: Nov 2019). Psychometric properties of the childbirth questionnaire. *Psychological Assessment*.

Fairbrother, N., Collardeau, F., Thordarson, D., Korol, C., Challacombe, F., & O'Neill, M. (Submission: Summer 2020). Diagnostic classification of fear of childbirth. *Archives of Women's Mental Health*.

Data collection:

We are currently interviewing women with high levels of childbirth fear in an effort to better understand and identify the diagnostic category most applicable to fear of childbirth. Data collection for this activity will be complete by Oct 2019. Following this, manuscript preparation will begin.

PERINATAL ANXIETY AND RELATED DISORDER SCREENING

At present, screening tools for perinatal anxiety disorders are urgently needed but lacking. Research in this area has been poorly conducted and recent systematic reviews have concluded that the evidence is insufficient for any existing screening tool to be recommended. We recently published an article in the *Journal of Affective Disorders* (Fairbrother, Corbyn, Thordarson, Ma, & Surm, 2019) in which we applied gold standard methodological criteria to evaluate both currently recommended screening tools as well as an alternative screening measure developed by our group. Only the alternative measure met the criteria of a "good enough" screening tool.

In Sep 2019 I resubmitted a project grant application to the CIHR to evaluate potential screening tools for perinatal anxiety disorders. I have been in communication with several health authorities and the provincial government, and there is significant enthusiasm regarding our plans. Our goal is to identify a screening tool which is sufficiently accurate and brief to be disseminated throughout British Columbia and elsewhere.

TWO-YEAR PLAN

Funding applications:

In Sep 2019 our team submitted a Project Grant application to the CIHR (\$960,000) to support the evaluation of a broad range of potential screening tools for perinatal anxiety and related disorders. In our previous submission we scored in the top half of applications. We have substantially revised our application and are optimistic about our chances of success. Our application is currently in the review process. We intend to continue with this application until funding is obtained.

In support of this we have also applied for a Women's Health Research Institute (WHIR) Catalyst Grant (Sep 2019; \$25,000) for funding to develop a perinatal anxiety and related disorder screening tool which will build on our most recent work.

ONLINE COGNITIVE BEHAVIOUR THERAPY FOR PERINATAL ANXIETY DISORDERS

Access to evidence-based treatment for an anxiety and related disorders in Canada is an issue of privilege and unequal access. Cognitive behaviour therapy (CBT) is frequently cited as the first line treatment for many anxiety and anxiety-related conditions. However, CBT is typically only available to those with the means to pay the out of pocket costs, ranging from \$1,000 to over \$3,000 for a course of treatment, or those with employment-based extended health coverage for psychological services. Further, CBT is frequently only available in urban areas. Women represent a vulnerable population in Canada and perinatal women even more so. The potential negative consequences of psychotropic medication for the developing fetus make pregnant and breastfeeding women a population particularly deserving of an evidence-based alternative to medication treatment.

In view of the above, our team aims to develop a suite of online CBT interventions for perinatal anxiety and related disorders, beginning with fear of childbirth and OCD. Online CBT when provided with small amounts of therapist support, have been found to be equally effective to face to face, individual treatment. The advantage of online CBT is that it is both more cost-effective than face to face treatment, and can be accessed by individuals living in rural and remote areas where psychological services are in short supply. The objective of our online CBT modules for perinatal anxiety is to decrease financially and geographically based disparities in access to CBT.

For this work, we have assembled an extraordinary team of investigators with extensive experience and expertise across a range of key domains relevant to the proposed work: randomized controlled trial design (Dr. Patricia Janssen, UBC), online CBT (Dr. Christine Korol), anxiety disorders (Drs. Nichole Fairbrother, Dana Thordarson, Melanie O'Neill, & Fiona Challacombe), perinatal OCD (Drs. Nichole Fairbrother & Fiona Challacombe), fear of childbirth (Drs. Nichole Fairbrother & Melanie O'Neill), and lived experience (Dr. Melanie O'Neill).

TWO-YEAR PLAN

Manuscript preparation:

As it becomes available, data from our pilot CBT for fear of childbirth (see below) will be submitted for publication. Planning of the data analysis and manuscript preparation will begin in the fall of 2019 with a view to submitting our manuscript in early 2020.

Fairbrother, N., Collardeau, F., Thordarson, D., Korol, C., Challacombe, F., & O'Neill, M.
(Submission: Summer 2020). Pilot CBT for fear of childbirth. *Archives of Women's Mental Health*.

Data collection:

We are currently pilot testing CBT intervention techniques for the treatment of fear of childbirth in order to be correctly positioned to develop a treatment manual for a Midwife-supported online CBT for fear of childbirth. Data collection is about to begin and will be complete by September 2019. Data from this pilot work will inform the development of the treatment manual for our online protocol.

Funding applications:

1. Our team was awarded funding (BC Support Unit; \$19,966; 2018-2019) to engage in preparatory work for a resubmission to the CIHR (Mar 2020) of a project grant application to support a randomized controlled trial of Midwife-supported online CBT for fear of childbirth. In our original submission we scored in the top half of submitted applications and received very encouraging feedback. We are optimistic about our chances of success in the fall funding cycle.

2. We have also been awarded seed funding (Island Health; \$19,700; 2017-2019) to prepare an application to the Canadian Institutes of Health Research (CIHR) for project funding for a randomized controlled trial of a therapist-assisted online cognitive behaviour therapy (CBT) for postpartum OCD. We intend a first submission in Mar 2020).

SEXUAL MINORITIES AND SEXUAL DIVERSITY

Outside of perinatal anxiety, my research interests tend towards disadvantaged and underserved groups. I am very interested in sexual and family diversity, in particular consensually non-monogamous romantic relationships (e.g., polyamorous and open) and parenting arrangements. Non-traditional sexualities continue to be stigmatized in our society and while LGBTQ+ rights have expanded enormously, there continues to be heavy stigma surrounding consensually non-monogamous relationships. Many individuals in these relationships are secretive about their relationships with their families, co-workers and employers. This is despite the fact that evidence indicates that these relationships are as satisfying and enduring as more conventional monogamous relationships. My research in this area aims to improve our understanding of, and reduce the stigma associated with these types of relationships. In this area I have given several workshops and have published initial data from our work in this area (Fairbrother, Hart, & Fairbrother, 2019). We were funded by a New Initiatives Award from the Faculty of Arts at Ryerson University (\$5,000; 2016-2017; Dr. Trevor Hart, PI) for our study of consensual non-monogamy prevalence. I was also awarded funding (\$9,978; UBC Hampton Fund; 2015-2017) for a larger study of psychological correlates of consensual non-monogamy among university students.

TWO-YEAR PLAN

Manuscript preparation:

Data from our UBC Hampton Fund is currently being prepared for analysis.

Noor, S., Skakoon-Sparling, S., **Fairbrother, N.**, & Hart, T. (Submission: Nov 2019). The Attitudes Toward Consensual Non-Monogamy Scale: Validation of a new self-report measure. *Journal of Sex Research*.

Fairbrother, N., Hart, T., & Torok (Submission: Summer 2020). Psychological correlates of consensual non-monogamy. *Journal of Sex Research*.

No additional data collection is planned at this point as we have 4-6 manuscripts likely to emanate from our current data set. Plans for new research will be built around findings from our current data.

REFERENCES

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