**Title**: MUMSPACE: REACHING PERINATALLY DEPRESSED WOMEN WITH INTERNET COGNITIVE-BEHAVIOURAL THERAPY FOR TREATMENT AND PREVENTION TOOLS

Jeannette Milgrom1,2,3, Alan Gemmill1,3, Andre Rodriguez1,3,Christopher Holt4, Charlene Holt1,3, Jessica Oliva1, Jennifer Ericksen1,3

1. Parent-Infant Research Institute, Austin Health, Heidelberg Heights, Victoria, Australia
2. Melbourne School of Psychological Sciences, University of Melbourne, Melbourne, Victoria, Australia
3. Perinatal Depression e-Consortium (PDeC), Australia
4. Australian College of Applied Psychology, Melbourne, Victoria, Australia

Email corresponding author: jeannette.milgrom@austin.org.au

**Objectives**: Fewer than 50% of postnatally depressed women seek help. Untreated postnatal depression (PND) has significant deleterious effects. Few well-validated specialized treatments programs have been successfully implemented in real-world practice. We developed and evaluated in RCTs a 6-session cognitive-behavioural-therapy (CBT) internet intervention for PND now available free to all Australian women through the MumSpace PDeC initiative. .

**Methods**: Since 2017, an internet CBT program (MumMoodBooster-MMB) has been supported by the Department of Health and available nationally on the MumSpace website in Australia to all perinatal women at no cost to individual users. The MMB intervention was developed and evaluated over 6 years. Women were surveyed on the content, perceived benefits and barriers followed by formative research using focus groups and systematic usability testing. We completed a feasibility study, n=53, a parallel 2-group randomised controlled trial, n=43, and have just finalized a NHMRC 3-arm study comparing online CBT treatment to face-to-face therapy and treatment as usual. A telephone coached and SMS supported version is available for both a pregnancy and postnatal version. The MumSpace website offers a stepped-care approach for perinatal women with access to preventive programs in addition to MMB.

**Results**: In our research trials we included only women with diagnosed depressive disorders and, 80% of those who received the Internet treatment achieved clinical remission (a 4-fold superiority over treatment as usual, better than face-to-face). Treatment adherence was excellent. Translation into the real world setting has shown the clinical gains in depression symptoms are similar across an 8-week period (approximate halving of PHQ-9 scores) despite better adherence to the coached version compared to SMS-supported version.

**Conclusions**: Results suggest that MumMoodBooster, is an effective treatment option for women clinically diagnosed with PND, can be integrated into clinician practice, and remains effective when translated into real-world practice.

**Keywords**: Perinatal depression, e-treatment