Investing in the earliest years
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The Parent-Infant Research Institute (PIRI) is dedicated to tackling perinatal depression, anxiety and their consequences through research and translating research evidence to practice. We recognise that prevention and very early intervention, from pregnancy and throughout the postpartum period and early infancy, is the ultimate upstream point of service delivery and key to interrupting the intergenerational impact of mental health difficulties. PIRI's 20-years of ground-breaking work has resulted in a suite of evidence-based programs that have and will continue to provide support to thousands of Australian mothers, children and their families.

- **600,000**
  Around 600,000 people become parents in Australia annually.

- **90,000**
  Approximately 90,000 of these parents experience perinatal depression or anxiety.

- **$877M**
  The estimated impacts of perinatal depression and anxiety in the first year totals $877m\(^1\).

- **$14,616**
  In the first year alone, the cost of perinatal mental illness to Australia’s economy is equivalent to $14,616 for every case of PND.

\(\text{($877M/60,000)}\)
Building a brighter future

Perinatal depression and anxiety are common and have devastating and costly consequences. Failure to detect and treat perinatal depression and anxiety incurs enormous social and economic costs. Overwhelmingly this is due to the impact of poor maternal mental health on the prospects of unborn children and young infants. Even relatively modest improvements in outcomes (10, 20 or 30% reduction) would be sufficient to justify the investment on value for money grounds.

It has never been more crucial we invest in the earliest years to build a brighter future.

Each year, 1 in 5 new mothers and 1 in 10 fathers suffer from perinatal anxiety and depression.

Up to 50% of these women are never identified.

Only 10% of women actively receive treatment.

Without early intervention, the long-term socioeconomic cost of perinatal mental illness exceeds $7 Billion¹ for every one-year birth cohort.

In lifetime costs associated with each case.

Supporting parent well-being and infant development
Free-to-Access Online CBT Treatment

MumMoodBooster (MMB) is a highly effective online treatment for depressed perinatal women experiencing perinatal depression and anxiety for use in general practice. This evidence-based program is available free to all Australian women who have a new baby and are struggling to cope, feeling flat, sad or depressed.

MMB is based on best practice psychological treatment and is designed to deliver the benefits of face-to-face cognitive-behavioural treatment without women needing to leave their home.

$1 invested
$39 saved
Preventing just 1/3 of the impact of perinatal mental illness through successful treatment with MumMoodBooster returns an enormous lifetime benefit to Australian parents, children and their families.

Proven effective in controlled scientific studies
Targets rapid symptom reduction
Resulted in 80% of users no longer being clinically depressed
Demonstrates the highest completion rate of any PND program with over 95% of sessions completed by users

Early intervention for maternal depression and anxiety in pregnancy and the postpartum is critical to protect infant development.

Research, screening and the use of e-health technologies in a stepped-care model is expanding access to evidence-based treatment services.

Data Sources for Return on Investment Analysis
1. Gidget Foundation, Perinatal Depression & Anxiety Australia (PANDA), Peach Tree Perinatal Wellness, and Perinatal Wellbeing Centre. The cost of perinatal depression and anxiety in Australia, 2019, Report prepared by PwC Consulting, Australia.
A Stepped Care Model of PIRI Programs integrated into Perinatal Mental Health Care

Funding has enabled PIRI to steadily build on our vision and continue to expand the reach of PIRI programs which are available at every step of a comprehensive stepped-care mental health model. Consumers have flexible access and move between different levels of evidence-based support as their needs change. A longer-term aim over the coming years is to develop a Professorial Chair in Perinatal Mental Health at the University of Melbourne, and to establish PIRI as a Centre of Research Excellence (CRE).

*Getting Ahead of PND & Beating The Blues Before Birth (face-to-face perinatal depression treatments), HUGS and Community HUGS (mother-infant interaction programs)
Overcoming Depression ( Suitable for delivery to nurses and GPs)
^National BUPA Parent-Baby Wellbeing Program refers women up the Stepped Care model.