What was the NPDI funded to achieve and how was it to be evaluated: ideal vs. reality <u>Nicole Highet</u>

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Background: In 2005 a large Australian screening study identified a 16% prevalence of perinatal depression with more than 30,000 families affected/annum. A National Plan for the implementation of a coordinated approach to perinatal mental health was then proposed with a view to reducing the significant personal, social and economic costs associated with unidentified and delayed treatment of perinatal mental health conditions.

Methods: In 2008, Australia's \$85M National Perinatal Depression Initiative (NPDI) was established under a bi-partisan agreement, with matched funding from the Commonwealth and all State and territory Governments. Key outcomes of the 5-year initiative included the development of Clinical Practice Guidelines, training and education for health professionals to undertake screening and provide evidence-based treatments, health promotion activities and the dissemination of information to consumers and carers to raise awareness and understanding and promote help-seeking.

Results: Despite significant progress in the uptake of screening across jurisdictions, lack of resources and prioritization of the Initiative's evaluation makes it difficult to monitor and evaluate the scope of the Initiative and its impact. Whilst there are positive indicators of training and resources uptake, the degree and impact of screening remains unknown.

Conclusion: In the absence of a prospective, coordinated evaluation, the Partnership Grant – using population level administrative data- examined the impact that the Initiative had on the uptake of perinatal mental health care services. The key outcomes from these will be discussed. Further, considerations for ongoing monitoring and sustainability of the NPDI into the future will be outlined.

References:

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