# CONSORT-EHEALTH (V 1.6.1) - Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating web-based and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 - description of the intervention) may also be applicable for other study designs.

The goal of the CONSORT EHEALTH checklist and guideline is to be

- a) a guide for reporting for authors of RCTs,
- b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the checklist.

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (non-pharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE OF THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red \*.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form - please include any quotes from your manuscript in QUOTATION MARKS, or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED). Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF \_AND\_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile Health Interventions

J Med Internet Res 2011;13(4):e126 URL: <a href="http://www.jmir.org/2011/4/e126/">http://www.jmir.org/2011/4/e126/</a> doi: 10.2196/jmir.1923 PMID: 22209829 lwissl2@gmail.com (not shared) Switch account Draft saved \* Required Your name \* First Last Lacey Pezley Primary Affiliation (short), City, Country \* University of Toronto, Toronto, Canada

University of Illinois-Chicago, Chicago, IL

Your e-mail address \*

abc@gmail.com

lwissl2@uic.edu

Title of your manuscript \*

Provide the (draft) title of your manuscript.

Feasibility of a Web-Based Intervention to Prevent Perinatal Depression and Promote Human Milk Feeding: Randomized Pilot Trial

Name of your A	App/Software/Intervention *
----------------	-----------------------------

If there is a short and a long/alternate name, write the short name first and add the long name in brackets.

Sunnyside

# Evaluated Version (if any)

e.g. "V1", "Release 2017-03-01", "Version 2.0.27913"

Your answer

# Language(s) \*

What language is the intervention/app in? If multiple languages are available, separate by comma (e.g. "English, French")

English

# URL of your Intervention Website or App

e.g. a direct link to the mobile app on app in appstore (itunes, Google Play), or URL of the website. If the intervention is a DVD or hardware, you can also link to an Amazon page.

Your answer

URL of an image/screenshot (optional)

Your answer

Accessibility * Can an enduser access the intervention presently?
access is free and open
<ul><li>access only for special usergroups, not open</li></ul>
access is open to everyone, but requires payment/subscription/in-app purchases
app/intervention no longer accessible
Other:
Primary Medical Indication/Disease/Condition * e.g. "Stress", "Diabetes", or define the target group in brackets after the condition, e.g. "Autism (Parents of children with)", "Alzheimers (Informal Caregivers of)"  Perinatal Depression Prevention
Primary Outcomes measured in trial * comma-separated list of primary outcomes reported in the trial
Depression, human milk feeding duration, site
Secondary/other outcomes
Are there any other outcomes the intervention is expected to affect?
Your answer

Kec	commended "Dose" *
Wha	t do the instructions for users say on how often the app should be used?
0	Approximately Daily
0	Approximately Weekly
0	Approximately Monthly
0	Approximately Yearly
0	"as needed"
•	Other: 2x per week
	orox. Percentage of Users (starters) still using the app as recommended after nonths *
<b>O</b>	unknown / not evaluated
0	0-10%
0	11-20%
0	21-30%
0	21-30% 31-40%
0	
0 0 0	31-40%
0 0 0	31-40% 41-50%
0 0 0 0	31-40% 41-50% 51-60%
0 0 0 0 0	31-40% 41-50% 51-60% 61-70%
0 0 0 0 0 0	31-40% 41-50% 51-60% 61-70% 71%-80%

Overall, was the app/intervention effective? *
yes: all primary outcomes were significantly better in intervention group vs control
partly: SOME primary outcomes were significantly better in intervention group vs control
on statistically significant difference between control and intervention
outcomes potentially harmful: control was significantly better than intervention in one or more
inconclusive: more research is needed
Other: Feasibility trial so significance testing was not completed
Article Preparation Status/Stage *  At which stage in your article preparation are you currently (at the time you fill in this form)
At which stage in your article preparation are you currently (at the time you fill in this form)
At which stage in your article preparation are you currently (at the time you fill in this form)  Onot submitted yet - in early draft status
At which stage in your article preparation are you currently (at the time you fill in this form)  Onot submitted yet - in early draft status  not submitted yet - in late draft status, just before submission
At which stage in your article preparation are you currently (at the time you fill in this form)  Onot submitted yet - in early draft status  not submitted yet - in late draft status, just before submission  submitted to a journal but not reviewed yet
At which stage in your article preparation are you currently (at the time you fill in this form)  Onot submitted yet - in early draft status  not submitted yet - in late draft status, just before submission  submitted to a journal but not reviewed yet  submitted to a journal and after receiving initial reviewer comments
At which stage in your article preparation are you currently (at the time you fill in this form)  not submitted yet - in early draft status  not submitted yet - in late draft status, just before submission  submitted to a journal but not reviewed yet  submitted to a journal and after receiving initial reviewer comments  submitted to a journal and accepted, but not published yet

Journal *  If you already know where you will submit this paper (or if it is already submitted), please provide the journal name (if it is not JMIR, provide the journal name under "other")
not submitted yet / unclear where I will submit this
Journal of Medical Internet Research (JMIR)
JMIR mHealth and UHealth
JMIR Serious Games
JMIR Mental Health
JMIR Public Health
JMIR Formative Research
Other JMIR sister journal
Other:
Is this a full powered effectiveness trial or a pilot/feasibility trial? *
Is this a full powered effectiveness trial or a pilot/feasibility trial? *  Pilot/feasibility
Pilot/feasibility
Pilot/feasibility
Pilot/feasibility Fully powered  Manuscript tracking number *  If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at

1a) TITLE: Identification as a	randor	mized tr	ial in th	e title		
1a) Doos vour papar address	CONS	ODT iton	n 1n2 *			
<ol> <li>Does your paper address</li> <li>does the title contain the phrase "I "other")</li> </ol>				(if not, ex	plain the r	eason under
yes						
Other: Randomized Pilo	ot Trial					
Identify the mode of delivery. Prefera title. Avoid ambiguous terms like "onl includes non-web-based Internet com offline products are used. Use "virtua only in the context of "online support terms for the class of products (such	bly use "wine", "virtu ine", "virtu iponents ( I" only in t groups". ( as "mobi	veb-based' ual", "inter (e.g. email the contex Compleme	and/or "n active". Us l), use "cor t of "virtua ent or subs	se "Interne mputer-ba al reality" stitute pro	t-based" o sed" or "ele (3-D worlds duct name	nly if Intervention ectronic" only if s). Use "online" s with broader
1a-i) Identify the mode of de Identify the mode of delivery. Prefera title. Avoid ambiguous terms like "onlincludes non-web-based Internet comoffline products are used. Use "virtua only in the context of "online support terms for the class of products (such application runs on different platform"	bly use "wine", "virtu ine", "virtu iponents ( I" only in t groups". ( as "mobi	veb-based' ual", "inter (e.g. email the contex Compleme	and/or "n active". Us l), use "cor t of "virtua ent or subs	se "Interne mputer-ba al reality" stitute pro	t-based" o sed" or "ele (3-D worlds duct name	nly if Intervention ectronic" only if s). Use "online" s with broader
Identify the mode of delivery. Prefera title. Avoid ambiguous terms like "onlincludes non-web-based Internet comoffline products are used. Use "virtua only in the context of "online support terms for the class of products (such	bly use "wine", "virtu nponents ( I" only in t groups". as "mobi ns.	veb-based' ual", "inter (e.g. email the contex Complema le" or "sma	" and/or "n active". Us I), use "cor it of "virtua ent or subs art phone"	se "Interne mputer-ba al reality" stitute pro instead o	t-based" of sed" or "ele (3-D worlds duct name f "iphone")	nly if Intervention ectronic" only if s). Use "online" s with broader

#### Does your paper address subitem 1a-i?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Feasibility of a Web-Based Intervention to Prevent Perinatal Depression and Promote Human Milk Feeding: Randomized Pilot Trial

1	la-ii) Non-web-based comp	onents	or impo	rtant co	-interve	ntions ir	n title
	Mention non-web-based components support").	or import	tant co-int	erventions	in title, if	any (e.g., "	with telephone
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	subitem not at all important	0	0	0	0	0	essential
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ir	Copy and paste relevant sections from ndicate direct quotes from your man nformation not in the ms, or briefly e	uscript), c	or elaborat	e on this i	tem by pro	viding add	itional
Υ	our answer						
1	a-iii) Primary condition or ta	arget gr	oup in th	ne title			
Е	Mention primary condition or target g Example: A Web-based and Mobile In Randomized Controlled Trial						•
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	subitem not at all important	0	0	0		0	essential
						C	Clear selection
г	Does your paper address sul	hitem 1a	a-iii? *				
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ir	ndicate direct quotes from your man nformation not in the ms, or briefly e	uscript), c	or elaborat	e on this i	tem by pro	viding add	itional
	Feasibility of a Web-Based Interv Milk Feeding: Randomized Pilot		o Prevent	Perinata	l Depres	sion and I	Promote Human

# 1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers, and blinding status.

# 1b-i) Key features/functionalities/components of the intervention and comparator in the METHODS section of the ABSTRACT

Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

1 2 3 4 5
subitem not at all important O O O O essential
Clear selection

# Does your paper address subitem 1b-i? \*

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"..a web-based cognitive behavioral therapy—based internet intervention, with and without human milk feeding education and support, to prevent perinatal depression and promote human milk feeding in Black mothers."

1b-ii) Level of human involve Clarify the level of human involvemer "therapist/nurse/care provider/physicif any). (Note: Only report in the abstract from the main body of text, consider	nt in the a cian-assis ract what	bstract, e.g sted" (men the main p	g., use phra	ases like " er and exp	fully autom ertise of p	nated" vs. roviders involved,
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Does your paper address sull Copy and paste relevant sections fro this" to indicate direct quotes from y information not in the ms, or briefly e "Participants were Black-identify"	m the mai our manu explain wh	nuscript ab script), or y the item	elaborate is not app	on this ite licable/re	m by provi evant for y	ding additional your study
1b-iii) Open vs. closed, web-assessments in the METHOE Mention how participants were recruclinic or a closed online user group (trial, or there were face-to-face compoutcomes were self-assessed throug traditional offline trials, an open trial researchers and participants know w "blinded" or "unblinded" to indicated usually refers to "open access" (i.e. p the main paper is reporting. If this interpretations assessed to the main paper is reporting.	OS section ited (online closed use conents (and housestion (open-lab hich treat the level control of the control open cont	on of the regroup tries part of the naires (as real trial) is a ment is be of blinding ts can self-	e ABSTR ne), e.g., fro al), and cla ne interver s common a type of c ing admin instead of enrol). (No	ACT om an ope arify if this ntion or fo in web-ba dinical tria istered. To "open", as ote: Only r	en access vas a pur rassessmonsed trials) I in which I o avoid cons "open" in eport in the	website or from a ely web-based ent). Clearly say if . Note: In both the Ifusion, use web-based trials e abstract what
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#### Does your paper address subitem 1b-iii?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Participants were recruited online. All assessments were either self report and online.

#### 1b-iv) RESULTS section in abstract must contain use data

Report number of participants enrolled/assessed in each group, the use/uptake of the intervention (e.g., attrition/adherence metrics, use over time, number of logins etc.), in addition to primary/secondary outcomes. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)

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subitem not at all important O O essential

Clear selection

## Does your paper address subitem 1b-iv?

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A total of 22 tertiary-educated participants were randomized. The mean number of log-ins was 7.3 (SD 5.3) for Sunnyside and 13.8 (SD 10.5) for Sunnyside Plus."

# 1b-v) CONCLUSIONS/DISCUSSION in abstract for negative trials Conclusions/Discussions in abstract for negative trials: Discuss the primary outcome - if the trial is negative (primary outcome not changed), and the intervention was not used, discuss whether negative results are attributable to lack of uptake and discuss reasons. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it) 1 2 3 4 5 subitem not at all important O O O essential Clear selection Does your paper address subitem 1b-v? Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like")

Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The results suggest that tertiary-educated Black mothers at risk for perinatal depression and who intended to human milk feed were receptive to and satisfied with a web-based cognitive behavioral therapy-based internet intervention, with and without human milk feeding education and support."

#### INTRODUCTION

2a) In INTRODUCTION: Scientific background and explanation of rationale

2a-i) Problem and the type of Describe the problem and the type of intervention vs. incorporated in broad population? Goals of the intervention complement other solutions? (Note:	f system/s der health ı, e.g., beir	care progr g more co	at is objec am? Inten st-effectiv	ded for a ve to other	particular p interventic	oatient ons, replace or
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2a-ii) Scientific background, Scientific background, rationale: Wha (be sure to discuss the use of similar for the study, i.e. what are the reason stakeholder viewpoint is the study per the comparator.	at is knowi r systems ns for and	n about the for other o what is the	e (type of) conditions, e context f	system th diagnose or this sp	nat is the o s, if approp ecific stud	bject of the study piate), motivation y, from which
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## Does your paper address subitem 2a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The previously studied Sunnyside intervention is a web-based CBT-based internet program used to manage mood during the perinatal period. Findings from the pilot study showed that intervention use and satisfaction were high among participants, and symptoms of depression decreased from midpregnancy to 6 weeks postpartum [33]."

## 2b) In INTRODUCTION: Specific objectives or hypotheses

#### Does your paper address CONSORT subitem 2b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Therefore, the objectives of this study were 2-fold. First, we examined the feasibility of the Sunnyside Plus by measuring adherence to the intervention, usability, and acceptability. Second, we tested the preliminary mental health and HM feeding outcomes of Sunnyside Plus compared with those of Sunnyside."

#### **METHODS**

3a) Description of trial design (such as parallel, factorial) including allocation ratio

#### Does your paper address CONSORT subitem 3a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"This randomized pilot trial used a comparative effectiveness research approach to compare 2 active treatments, Sunnyside [33] and the newly developed Sunnyside Plus.." "Participants were then randomized in a 2:1 allocation ratio to either Sunnyside Plus or Sunnyside using a block randomization method with a web-based randomization service provider, Sealed Envelope [37]."

3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons

## Does your paper address CONSORT subitem 3b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No changes to methods occurred after trial commencement.

# 3b-i) Bug fixes, Downtimes, Content Changes

Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].

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#### Does your paper address subitem 3b-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

There were no bug fixes, downtimes, or content changes.

# 4a) Eligibility criteria for participants

#### Does your paper address CONSORT subitem 4a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Inclusion criteria were as follows: (1) pregnant and between 20 and 28 weeks of gestation, (2) aged ≥18 years, (3) Black or African American, (4) intending to HM-feed their child, (5) self-reporting mild to moderate depressive symptoms (Patient Health Questionnaire [PHQ]−8 score of 5-14), (6) access to a broadband internet connection, and (7) proficiency in the English language. Exclusion criteria were as follows: (1) pregnant with multiples; (2) visual, hearing, voice, or motor impairment that would prevent completion of the study procedures; (3) diagnosed with a major depressive episode, psychotic disorder, bipolar disorder, dissociative disorder, substance use disorder, or other diagnoses for which participation in this trial was either inappropriate or dangerous based on self-report; or (4) currently receiving treatment (medication or psychotherapy) and having an intention to resume antidepressant medication after birth (ie, those who discontinued their medication during pregnancy)."

# 4a-i) Computer / Internet literacy

Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.

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#### Does your paper address subitem 4a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Computer / internet literacy was not assessed. Participants were recruited via online methods so literacy was assumed.

#### 4a-ii) Open vs. closed, web-based vs. face-to-face assessments:

Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.

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# Does your paper address subitem 4a-ii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Participants were recruited through advertisements placed on Ovia Health [34], a nationwide web-based pregnancy forum and internet-based application, between June 12, 2020, and September 15, 2020." All study components were completed online or via video support calls or text messages.

4a-iii) Information giving dur	ing reci	ultillelli				
Information given during recruitment. informed consent procedures (e.g., pritem X26), as this information may habias results.	ublish the	informed	consent d	ocumenta	tion as ap <sub>l</sub>	pendix, see also
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#### Does your paper address subitem 4b-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Following consent, qualifying individuals were immediately directed to complete the baseline assessment surveys that were provided via a REDCap (Research Electronic Data Capture; Vanderbilt University) link; study data were collected and managed using REDCap electronic data capture tools hosted by the UIC [35,36]." "Follow-up assessments using REDCap took place following the completion of 6 weeks of web-based lessons during pregnancy (third trimester) and at 6 and 12 weeks postpartum. A brief assessment of HM feeding continuation and exclusivity (yes or no reply) was performed on a weekly basis via SMS text messaging (SimpleTexting [38]) from 1 to 6 weeks postpartum."

# 4b-ii) Report how institutional affiliations are displayed

Report how institutional affiliations are displayed to potential participants [on ehealth media], as affiliations with prestigious hospitals or universities may affect volunteer rates, use, and reactions with regards to an intervention. (Not a required item – describe only if this may bias results)

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subitem not at all important O O O O essential

# Does your paper address subitem 4b-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

5) The interventions for each group with sufficient details to allow replication, including how and when they were actually administered

5-i) Mention names, credent owners  Mention names, credential, affiliation				·	·	
are owners or developer of the softw mentioned elsewhere in the manuscr		eeds to be	declared	in a "Conf	lict of inter	est" section or
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5-ii) Describe the history/dev Describe the history/development pro focus groups, usability testing), as th interpreting results.	ocess of t	he applica	tion and p			, –
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subitem not at all important	0	0	0	0	0	essential
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subitem not at all important	0	0	0	0	0	essential
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our answer						
5-iv) Quality assurance meth	nods					
Provide information on quality assura		ods to ens	sure accur	acy and qı	uality of inf	formation
Provide information on quality assura		ods to ens	sure accur	acy and qu	uality of inf	formation
5-iv) Quality assurance metherovide information on quality assurance or ovided [1], if applicable.  subitem not at all important	ance meth		3		·	formation essential

Ensure replicability by publishing the and/or providing flowcharts of the algorianciple be able to replicate the stud	gorithms ι	used. Repl	icability (i.	.e., other r		•
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5-vi) Digital preservation						
Digital preservation: Provide the URL disappear over the course of the year webcitation.org, and/or publishing the pages behind login screens cannot be without login.	s; also ma e source o	ake sure th code or sc	ne interver reenshots,	ntion is ard /videos al	chived (Inte	rnet Archive, e article). As
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	O oitem 5	-vi?	0	0	0	essential

5-vii) Access  Access: Describe how participants according (or were paid) or not, whether they had participants obtained "access to the peditors/reviewers/readers, consider treviewers/readers to explore the applications.	id to be a platform a o provide	member c and Interno a "backdo	of specific et" [1]. To o oor" login a	group. If kensure account or	known, des cess for demo mod	cribe how de for
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5-viii) Mode of delivery, features and comparator, and the the Describe mode of delivery, features of the theoretical framework [6] used to techniques, persuasive features, etc., description of the content (including how) it is tailored to individual circum feedback" [6]. This also includes a demediated communication is a compo [6]. It also includes information on proamount of text on pages, presence of	oretical unctionali design th see e.g., where it is astances a escription nent – wh esentation	framevaties/compem (instru [7, 8] for to se coming frand allows of communether con in strategies	vork  conents of actional streaminology from and w ausers to t anication d amunication es [1], inclu	the interv rategy [1], y). This ind who develo track their lelivery ch on was syn uding page	rention and behaviour cludes an i oped it) [1], progress a annels and nchronous	comparator, and change n-depth whether [and nd receive] — if computeror asynchronous
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#### Does your paper address subitem 5-viii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The Sunnyside intervention is a web-based intervention (a website with didactic material and tools) targeting skills to manage mood during and after pregnancy [33]. Sunnyside comprises 6 weeks of web-based lessons during pregnancy and web-based booster sessions at 2, 4, and 6 weeks postpartum. The intervention website was based on CBT and interpersonal therapy principles and comprised 12 learning modules covering basic skills (eg, behavioral activation and cognitive restructuring). Tools to assist in learning and implementing skills were associated with each learning module. The Feel Tool (ie, mood rating and feelings entry) encouraged participants to rate their mood each time they visited the site to obtain a better sense of their day-to-day feelings. The Think Tool (ie, thought record) was used to track one's thoughts and discern between helpful and harmful thinking. Participants tracked their daily behaviors, identified patterns, and planned future positive activities using the Do Tool (ie, activity scheduling or monitoring and goal setting). In this study, participants were given unlimited access to the web intervention content that comprised lessons and tools and were encouraged to use the site at least twice weekly as new modules become available (every 3-4 days). The web-based lessons that were to be completed during pregnancy required approximately 40 to 60 minutes per week for 6 weeks. The web-based lessons completed during the first 6 weeks postpartum required approximately 10 to 20 minutes per week for 6 weeks." "Sunnyside Plus is built upon Sunnyside but also includes additional education and support to promote HM feeding. Education and skill promotion for HM feeding was provided during the 6 weeks of webbased lessons during pregnancy and then continued through 6 weeks postpartum. This postpartum support involved weekly web-based lessons, text support messages, and video support calls with a lactation specialist. The research team requested that at least 2 lactation support calls take place; however, beyond that, support was provided on an asneeded basis determined by the participant. Importantly, the participants had the option to choose who provided lactation support from a racially diverse team. Text support messages were sent using SimpleTexting [38], a user-friendly text-marketing software. Frequency of messages tapered from 3 to 1 message per week during the first 6 weeks postpartum. The SMS text message content included HM feeding encouragement and a reminder of the webbased lactation support."

5-ix) Describe use paramete Describe use parameters (e.g., intend recommendations were given to the use the intervention used ad libitum.	user, e.g.,	-			-	
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indicate direct quotes from your man information not in the ms, or briefly e  New lessons were released twice back for those lessons as desire	uscript), c xplain wh e per wed d.	or elaborat y the item ek. Partic	e on this i is not app	tem by pro licable/re	oviding add evant for y	litional our study
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#### Does your paper address subitem 5-x?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The research team requested that at least 2 lactation support calls take place; however, beyond that, support was provided on an as-needed basis determined by the participant. Importantly, the participants had the option to choose who provided lactation support from a racially diverse team."

## 5-xi) Report any prompts/reminders used

Report any prompts/reminders used: Clarify if there were prompts (letters, emails, phone calls, SMS) to use the application, what triggered them, frequency etc. It may be necessary to distinguish between the level of prompts/reminders required for the trial, and the level of prompts/reminders for a routine application outside of a RCT setting (discuss under item 21 – generalizability).

1 2 3 4 5
subitem not at all important O O O O essential

# Does your paper address subitem 5-xi? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Participants received emails twice per week when new material was released.

#### 5-xii) Describe any co-interventions (incl. training/support)

Describe any co-interventions (incl. training/support): Clearly state any interventions that are provided in addition to the targeted eHealth intervention, as ehealth intervention may not be designed as stand-alone intervention. This includes training sessions and support [1]. It may be necessary to distinguish between the level of training required for the trial, and the level of training for a routine application outside of a RCT setting (discuss under item 21 – generalizability.

1 2 3 4 5
subitem not at all important O O O O essential

#### Does your paper address subitem 5-xii? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No co-interventions were provided

6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were assessed

# Does your paper address CONSORT subitem 6a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The primary focus of this randomized pilot trial was feasibility (adherence to and satisfaction with the intervention) and preliminary outcomes on depression and anxiety symptom severity and HM feeding initiation, continuation, and exclusivity. Participants' sociodemographic data, parity, pregnancy-related variables, HM feeding history, mental health history, and birth-related variables were also measured." "Follow-up assessments using REDCap took place following the completion of 6 weeks of web-based lessons during pregnancy (third trimester) and at 6 and 12 weeks postpartum."

6a-i) Online questionnaires: of apply CHERRIES items to designed/deployed		•				ne use and
If outcomes were obtained through o and apply CHERRIES items to describ	-			-		
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6a-ii) Describe whether and defined/measured/monitored Describe whether and how "use" (incl (logins, logfile analysis, etc.). Use/ad reported in any ehealth trial.	d uding inte	ensity of u	se/dosage	e) was defi	ned/meas	ured/monitored
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was obtained	w, and w	vnen qu	alitative	тееора	CK Trom	participants			
Describe whether, how, and when qu emails, feedback forms, interviews, f			om partici <sub>l</sub>	pants was	obtained (	e.g., through			
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6b) Any changes to trial ou	tcomes	after th	e trial c	ommer	iced, wi	th reasons			
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No changes to trial outcomes were made after the trial commenced.									
<b>7a) How sample size was de</b> NPT: When applicable, details of who addressed			lustering b	oy care pro	ovides or c	enters was			

calculating the sample size  Describe whether and how expected	attrition w	vas taken i	nto accou	nt when ca	alculating t	he sample size.
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## Does your paper address CONSORT subitem 8a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Participants were then randomized in a 2:1 allocation ratio to either Sunnyside Plus or Sunnyside using a block randomization method with a web-based randomization service provider, Sealed Envelope [37]."

# 8b) Type of randomisation; details of any restriction (such as blocking and block size)

#### Does your paper address CONSORT subitem 8b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Participants were then randomized in a 2:1 allocation ratio to either Sunnyside Plus or Sunnyside using a block randomization method with a web-based randomization service provider, Sealed Envelope [37]."

9) Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

## Does your paper address CONSORT subitem 9? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The REDCap randomization mechanism was used.

10) Who generated the random allocation sequence, who enrolled
participants, and who assigned participants to interventions

#### Does your paper address CONSORT subitem 10? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

The REDCap randomization mechanism was used.

# 11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how

NPT: Whether or not administering co-interventions were blinded to group assignment

#### 11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

1 2 3 4 5

subitem not at all important

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essential

# Does your paper address subitem 11a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No blinding occurred in this trial.

11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator".

subitem not at all important O O O O essential

## Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Participants knew they could be randomized to either Sunnyside or Sunnyside Plus. They were not told which was the intervention of interest.

#### 11b) If relevant, description of the similarity of interventions

(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

# Does your paper address CONSORT subitem 11b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Sunnyside Plus is built upon Sunnyside but also includes additional education and support to promote HM feeding."

# 12a) Statistical methods used to compare groups for primary and secondary outcomes

NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

#### Does your paper address CONSORT subitem 12a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Significance testing for within- and between-group differences in mental health and HM feeding outcomes were assessed; however, this feasibility study was not powered for these types of analyses; therefore, our data are largely presented descriptively. These results should be interpreted with caution because of the small sample size."

# 12a-i) Imputation techniques to deal with attrition / missing values

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

1 2 3 4 5
subitem not at all important O O O O essential

# Does your paper address subitem 12a-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Imputation techniques to deal with attrition / missing values were not addressed.

12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses

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Subgroup analyses and adjusted	d analyse	s were no	ot done.			
X26) REB/IRB Approval and subheading under "Method					mendec	d as
X26-i) Comment on ethics c	ommitte	ee appro	oval			
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x26-ii) Outline informed con Outline informed consent procedures etc.?), and what information was pro consent documents.	s e.g., if co	onsent was	obtained			
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Informed consent was completed	d in RED	Cap elec	tronically			
X26-iii) Safety and security p	rocedu	res				
Safety and security procedures, incl.   or detection of harm (e.g., education				-	ken to red	uce the likelihoo
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Does your paper address suk	oitem X	26-iii?				
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RESULTS						

13a) For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome

NPT: The number of care providers or centers performing the intervention in each group and the number of patients treated by each care provider in each center

### Does your paper address CONSORT subitem 13a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A total of 22 tertiary-educated Black pregnant individuals in their second trimester (mean EGA 22.6 [SD 2.5] weeks) participated in this US-based study." "Approximately 78% (7/9) of Sunnyside participants and 77% (10/13) of Sunnyside Plus participants completed the study through 12 weeks postpartum. Approximately 9% (2/22) of participants (1 from each intervention group) withdrew from the study after the baseline assessment. One of the Sunnyside participants did not complete the third trimester follow-up assessment but continued with the study. One of the participants in the Sunnyside Plus group did not engage in the web-based intervention or complete the assessments and was therefore withdrawn by the research team after the baseline assessment. Approximately 9% (2/22) of additional participants (1 from each intervention group) were considered lost to follow-up during the postpartum period; their mood scores did not differ from those who completed the study."

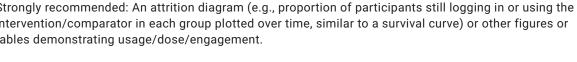
13b) For each group, losses and exclusions after randomisation, together with reasons

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Approximately 78% (7/9) of Sunnyside participants and 77% (10/13) of Sunnyside Plus participants completed the study through 12 weeks postpartum. Approximately 9% (2/22) of participants (1 from each intervention group) withdrew from the study after the baseline assessment. One of the Sunnyside participants did not complete the third trimester follow-up assessment but continued with the study. One of the participants in the Sunnyside Plus group did not engage in the web-based intervention or complete the assessments and was therefore withdrawn by the research team after the baseline assessment. Approximately 9% (2/22) of additional participants (1 from each intervention group) were considered lost to follow-up during the postpartum period; their mood scores did not differ from those who completed the study."

13b-i) Attrition diagram
Strongly recommended: An attrition intervention/comparator in each gro tables demonstrating usage/dose/e



essential subitem not at all important

### Does your paper address subitem 13b-i?

Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

### 14a) Dates defining the periods of recruitment and follow-up

## Does your paper address CONSORT subitem 14a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"Participants were recruited through advertisements placed on Ovia Health [34], a nationwide web-based pregnancy forum and internet-based application, between June 12, 2020, and September 15, 2020."

14a-i) Indicate if critical "secular events" fel resources available or "changes in co	ll into the	study peri	od, e.g., si	gnificant o	changes in	Internet
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14b) Why the trial ended or	was sto	opped (6	early)			
Does your paper address CC Copy and paste relevant sections from indicate direct quotes from your man information not in the ms, or briefly each of the trial did not end / was not st	m the mai uscript), c xplain wh	nuscript (ii or elaborat ny the item	nclude quo e on this i	otes in quo tem by pro	viding add	itional
15) A table showing baseline	e demo	graphic	and cli	nical ch	aracteris	stics for each

NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and

centers (volume) in each group

### Does your paper address CONSORT subitem 15? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This information is provided in Table 2. Baseline sample characteristics by intervention group (N=22).

### 15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

1 2 3 4 5

subitem not at all important

essential

### Does your paper address subitem 15-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"A total of 22 tertiary-educated Black pregnant individuals in their second trimester (mean EGA 22.6 [SD 2.5] weeks) participated in this US-based study. The mean age of the participants was 30.4 (SD 3.9) years. Most participants were married or partnered and cohabiting (17/22, 77%), employed full-time (13/22, 59%), or had private health insurance (16/22, 73%). All participants attended at least some college degree (12/22, 55%) or held a graduate or professional degree (10/22, 45%). Just over half (12/22, 55%) of the participants reported an annual household income of ≥US \$51,000, with the average household size being 2.5 (SD 1)."

16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups

port multiple "denominators" and udy participation [and use] threshold more than y weeks, N participa ints of interest (in absolute and reervention.	olds" [1], e. ints "used"	g., N expo the interv	sed, N con ention/co	sented, N nparator a	used more it specific	e than x times, N pre-defined time
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o significance testing was cor atistics are provided.	npleted d	ue to fea	sibility na	ature of t	he study.	Descriptive
-ii) Primary analysis should mary analysis should be intent-to e appropriate caveats that this is r	-treat, seco no longer a	ondary ana randomiz	llyses cou ed sample	(see 18-i)	).	only "users", with
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17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)

### Does your paper address CONSORT subitem 17a? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No significance testing was completed due to feasibility nature of the study. Descriptive statistics are provided.

## 17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

	1	2	3	4	5	
subitem not at all important	0	0	0	0	0	essential

### Does your paper address subitem 17a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"The mean number of log-ins across the 6-week intervention plus booster sessions was 7.3 (SD 5.3) for Sunnyside and 13.8 (SD 10.5) for Sunnyside Plus. Within the Sunnyside group, the average number of lessons accessed during pregnancy (from a total of 13) was 10.1 (SD 3.5) and during postpartum (from a total of 3) was 1.6 (SD 1.3). Within the Sunnyside Plus group, the average number of lessons accessed during pregnancy (from a total of 13) was 9.7 (SD 4.1) and during postpartum (from a total of 9) was 2.6 (SD 3.3). Approximately 67% (6/9) of Sunnyside participants and 58% (7/12) of Sunnyside Plus participants completed at least 50% of the available lessons. The average number of tools used was 11 (SD 6.6) for Sunnyside and 25.8 (SD 27.8) for Sunnyside Plus. Participants in the Sunnyside Plus group used the activity tool more than those in the Sunnyside group (P=.03). All other site uses were similar between the groups, with no additional differences found."

17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended

### Does your paper address CONSORT subitem 17b? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No significance testing was completed due to feasibility nature of the study. Descriptive statistics are provided.

18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory

Does your paper address	CONSORT subitem 18? *
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Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No significance testing was completed due to feasibility nature of the study. Descriptive statistics are provided.

### 18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

1 2 3 4 5

subitem not at all important

essential

### Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

### 19) All important harms or unintended effects in each group

(for specific guidance see CONSORT for harms)

## Does your paper address CONSORT subitem 19? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No harms or unintended effects occurred.

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#### DISCUSSION

# 22) Interpretation consistent with results, balancing benefits and harms, and considering other relevant evidence

NPT: In addition, take into account the choice of the comparator, lack of or partial blinding, and unequal expertise of care providers or centers in each group

# 22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use)

Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).

1 2 3 4 5
subitem not at all important O O O O essential

### Does your paper address subitem 22-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"This study describes the feasibility and preliminary findings of a novel CBT-based internet intervention to prevent perinatal depression and promote HM feeding in Black mothers with mild to moderate depressive symptoms and intention to HM-feed. Although both active treatment groups aimed to target skills to manage mood, the newly developed Sunnyside Plus intervention used evidence-based practices to promote and actively support the HM feeding." "The results of this study suggest that tertiary-educated Black mothers at risk for perinatal depression and who intended to HM-feed were receptive to, engaged with, and satisfied with a web-based CBT-based internet intervention, with and without HM feeding education and support, spanning from midpregnancy through 6 weeks postpartum. Preliminary findings indicate that both Sunnyside and Sunnyside Plus interventions have the potential to affect symptoms of depression, anxiety, and HM feeding outcomes."

22-ii) Highlight unanswered r Highlight unanswered new questions			•	future	research	1	
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20) Trial limitations, address relevant, multiplicity of anal	•	ırces of	potenti	al bias,	impreci	sion, and, if	
20-i) Typical limitations in ehealth trials  Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.							
subitem not at all important	1	2	3	4	5	essential	

### Does your paper address subitem 20-i? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

"This study had several limitations. Although the recruitment response was high, with an average of approximately 17 respondents each day during the 3-month recruitment period, the use of a convenient internet sample may have led to a bias toward higher education levels. In addition, our recruitment method through Ovia Health might not have been the best route, given the characteristics of those using the platform, and future projects should consider other recruitment routes. The major factors for exclusion were race and EGA. Future recruitment efforts should target internet-based applications used by those who identify as Black or African American. In addition, a system that allows for future rescreening might capture those who meet all inclusion criteria, except for the current EGA. As a small pilot study, this trial was not powered to reliably detect small significant differences or associations. The results should be interpreted with caution, and a larger trial is needed to verify these outcomes. Furthermore, the primary outcome data were based on self-report assessments, which may introduce recall bias. Finally, with no true control group, we relied on outside data to compare the rates of mental health and HM feeding outcomes."

### 21) Generalisability (external validity, applicability) of the trial findings

NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

### 21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations

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Disc pror imp	ii) Discuss if there were extine application setting cuss if there were elements in the application provided in the application of these elements in the outside of a RCT setting.	e RCT that colvement,	would be o	different in	a routine other co-i	application	n setting (e.g., ns) and what
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### Does your paper address subitem 21-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

### OTHER INFORMATION

23) Registration number and name of trial registry

### Does your paper address CONSORT subitem 23? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

ClinicalTrials.gov NCT04128202; https://www.clinicaltrials.gov/ct2/show/NCT04128202

### 24) Where the full trial protocol can be accessed, if available

### Does your paper address CONSORT subitem 24? \*

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

https://www.clinicaltrials.gov/ct2/show/NCT04128202

## 25) Sources of funding and other support (such as supply of drugs), role of funders

### Does your paper address CONSORT subitem 25? \*

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

No sources of funding or other support.

### X27) Conflicts of Interest (not a CONSORT item)

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