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**Submission to the
2025-26 ACT Budget Consultation**

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Perinatal Wellbeing Centre has assisted Canberra families for over thirty years, but has never been funded to meet the real need in our community. During the past year Perinatal Wellbeing Centre provided direct care and support for more than 500 local parents. It is notable that not only did we support more clients, but we provided them with increased levels of care and support, with the number of individual counselling sessions and group sessions exceeding the preceding year by 16% and 8% respectively. 100% of our clients report that our evidence informed programs improve their mental health and wellbeing, and our team have continued to develop new programs and workshops to better meet community needs.

It is also clear that the cost of living crisis has significantly increased anxiety levels in expectant and new parents, exacerbating the stress from the global pandemic and climate related events. It is likely that PwC Consulting's 2019 estimates of 1 in 5 mothers and 1 in 10 fathers and partners experiencing perinatal depression and anxiety would be significantly higher if recalculated today. They reported that for each annual cohort of births this costs the Australian economy \$877m in the first year of those babies' lives, and \$7.3bn in total costs over the child's lifetime.¹

These are the economic costs, but the human costs of perinatal mental health problems go much further with ongoing mental and physical health problems for parents and children, family breakdown, absenteeism and loss of employment. Children of parents with perinatal mental health issues are affected in both the short and long term, with a number of impacts including:

- increased risk of low birth weight/premature birth;
- increased likelihood of childhood injury;
- reduced immune system response;
- increased likelihood of asthma/respiratory conditions;
- increased likelihood of childhood trauma;
- increased likelihood of neurodevelopmental issues;
- increased risk of depression;
- increased risk of anxiety; and
- increased risk of ADHD.

Similarly parents with perinatal mental health issues not only face a lower overall quality of life and increased health system use, but are also impacted by perinatal mental health problems in their personal and work lives. Impacts for parents with perinatal mental health issues include:

- increased use of primary and community health services;
- increased use of hospitals;
- increased risk of chronic diseases;
- increased risk of substance abuse;
- increased workforce exit;
- absenteeism; • presenteeism;
- lower quality of life; and
- increased risk of suicide.

¹ PwC Consulting Australia, *The cost of perinatal depression and anxiety in Australia*, November 2019, <https://www.perinatalwellbeingcentre.org.au/news/cost-of-perinatal-depression-and-anxiety-in-australia>

We know that prevention and early intervention, such as through the services provided by Perinatal Wellbeing Centre, are the key to resolving this dilemma.

Residential Mother-Baby Mental Health Unit

We are excited to have the residential perinatal mental health facility included in the 2024 election commitments and look forward to the building of the facility being included in this 2025 Budget.

New parents who require inpatient mental health care will be grateful to not need to travel to Sydney based private hospitals to get the help they need.

A commitment in this Budget to build an inpatient perinatal mental health facility which will provide essential care locally is a logical extension of the scoping study funded 2 years ago.

We hope that the model of care incorporating this facility and associated programs appropriately includes services provided by community mental health providers in addition to acute care provided by Canberra Health Services.

Antenatal Wellbeing Workshops

Considering inpatient care, the second hospital joining Canberra Health Services is a real opportunity to embed ongoing wellbeing into our maternity services across the ACT. Perinatal Wellbeing Centre has been running a pilot outreach program of psychoeducation into Centenary Hospital that fosters perinatal mental health, creating more positive outcomes for parents and their children.

The monthly 2-hour Antenatal Wellbeing Workshops have been facilitated by members of our Perinatal Mental Health team.

The Workshops represent a collaborative effort to promote the mental health and wellbeing of expectant parents during the perinatal period. By integrating specialised psychoeducation into existing childbirth education programs and engaging individuals with lived experience in the project design process, this initiative seeks to empower participants, strengthen healthcare systems, and build supportive community networks to better serve the needs of antenatal patients and their families. Through careful planning, thoughtful implementation, and continuous evaluation, the project aims to make a meaningful difference in the lives of expectant parents, laying the foundation for healthier pregnancies, smoother transitions to parenthood, and brighter futures for families across the community.

A pilot program, funded by the John James Foundation, has been running at Centenary Hospital for Women and Children since September 2024 with an average of 13 attendees per workshop. Post-workshop evaluation surveys have been administered following every session with 100% of pregnant respondents reporting that they believed that the workshop would help enhance their wellbeing, and that it was professionally facilitated. Feedback was collected as to the benefit of each module of the workshop, and adjustments were made to improve the program following the active feedback.

Participants have advised that they gained knowledge and understanding of useful concepts and tools from the sessions.

We can save money and improve health by investing in these early interventions. It would be a cost-effective and valuable exercise to roll these workshops out on an ongoing basis across both public hospitals.

Development of Peer-Led Programs

Peer-led programs at Perinatal Wellbeing Centre offer a uniquely powerful and effective approach to supporting the mental health and wellbeing of parents during the perinatal period. Drawing on the lived experience of those who have navigated their own mental health challenges during pregnancy, early parenting, or both, peer support creates a safe, non-judgemental space where participants feel seen, understood, and less alone. These connections can foster hope, reduce stigma, and promote recovery in ways that complement and enhance clinical care. As outlined by the Scottish Recovery Network, peer support “is not about fixing people – it’s about walking alongside them and sharing strength, experience, and hope.” This ethos is at the heart of our work.

Funding peer-led programs is not just a compassionate choice—it is also a strategic one. Peer support enhances engagement, builds trust in services, and often reaches those who may be hesitant to access traditional mental health support. It empowers participants to take an active role in their recovery, fosters community connection, and helps reduce long-term reliance on intensive clinical interventions. For many, seeing someone who has “been there” and recovered provides a sense of possibility that professional advice alone cannot achieve.

At Perinatal Wellbeing Centre, we have already seen the positive impact of integrating peer workers into our programs. With further investment, we could expand these initiatives to offer structured peer-led groups, one-on-one support, and co-facilitation of psychoeducational sessions. We could also offer training and employment pathways for people with lived experience, supporting recovery not only for those receiving support but for those delivering it. Funding peer-led programs is an investment in community capacity, workforce development, and holistic, human-centred care.

MACH New Parents Groups Expansion

Numerous researchers have articulated the significant link between loneliness, isolation and the development of perinatal depression. We know that the experience of loneliness contributes to the incidence of depression, and conversely depression can lead to a sense of loneliness – a vicious circle of negative reinforcement.

A recent meta-synthesis of 27 qualitative research publications indicated that loneliness was central to women’s experience of postnatal depression. The studies indicated that loneliness for new mothers could be relieved by validation from trusted healthcare professionals, peer support from other mothers who have experienced postnatal depression, and practical and emotional support from family.²

These strategies which ameliorate loneliness and assist in recovery from depression are at the core of the programs offered by Perinatal Wellbeing Centre. From our Telephone Counselling Program which validates and recommends various strategies to manage symptoms, through our group programs which include psychoeducation and connection with other new mothers, to our Partners Information Evenings which help educate and activate other family members – each of these not only focuses on support on a path to wellbeing, but also a reduction in loneliness.

² Adlington, K., Vasquez, C., Pearce, E. et al. ‘Just snap out of it’ – the experience of loneliness in women with perinatal depression: a Meta-synthesis of qualitative studies. *BMC Psychiatry* 23, 110 (2023). <https://doi.org/10.1186/s12888-023-04532-2>

In addition, new mothers report the opportunity to make friendships and reduce loneliness through the New Parents Groups run by the Maternity and Child Health team at CHS. The groups are currently restricted to first time parents of infants from 6 weeks to 4 months. It would be a valuable budgetary measure to increase access to these groups to all new parents with infants within that age group.

With the ACT's population increasing by almost 10,000 residents annually it is clear that many parents have already had their first child interstate or overseas. They would greatly benefit from attending the New Parents Groups as an opportunity to connect locally, but are currently excluded. Similarly, many parents have a gap between their children – sometimes due to new relationships. Where there is a significant gap between births, it is unlikely that the connections made previously would still be as relevant for new mothers.

It could be argued that opening up the New Parents Groups beyond the first time parent restriction would be expensive, however, it would be less likely that new parents who had previously attended a group within the last five years would re-enrol as the information would be similar and their connections would still be relevant.

This would be a relatively small investment which could have significant preventive impact.

Professional Development for the Community Sector

The 2021 Counting the Costs Report³ demonstrated that 75% of organisations within the community sector in the ACT are either not funded, or underfunded to provide adequate professional development and training for their staff. Leaders in the sector confirmed that rising costs which are not matched by funding lead to an inability for services to afford to provide appropriate educational opportunities for their staff.

This has significant ramifications for the sector. It is more difficult to attract staff to a workplace that cannot offer appropriate conditions such as ongoing training and education. Community sector staff are not paid high wages, so are less likely to choose to pay for additional education themselves. This is contributing to an ongoing de-skilling of the sector, and makes it particularly difficult to offer staff career pathways, or even enrich their current roles.

Fortunately, ACT Government employees have access to numerous regular training opportunities, many delivered online.

Perinatal Wellbeing Centre recommends that these professional development courses be made available to community sector staff at no cost to the non-government organisation for online courses. A percentage of places at courses delivered in person could also be made available, potentially at a very small fee if it is not sustainable to offer them for free. In addition to enabling community organisations to better upskill their staff to deliver better outcomes to vulnerable Canberrans, this would also foster greater connection and understanding between community and government sector staff attending training together.

³ Cortis, N., Blaxland, M. and Adamson, E. (2021). Counting the Costs: Sustainable funding for the ACT community services sector. Sydney: UNSW Social Policy Research Centre
<https://www.act.gov.au/open/counting-the-costs#:~:text=It%20presents%20a%20comprehensive%20picture,levels%20that%20meet%20community%20needs.>

Commissioning of the Community Mental Health Sector

When considering broader mental health issues, we know that the community-managed mental health sector delivers two-thirds of the ACT's mental health services and yet only receives 13% of the total mental health service funding. We also know that we can cost effectively improve the community's wellbeing through a focus on prevention and early intervention.

This can only be achieved if the funding for all mental health services, delivered by both government and non-government organisations, is re-assessed and potentially reallocated. Community mental health services like Perinatal Wellbeing Centre need to be better funded so that we can continue to achieve the great outcomes that we currently do. The Sector Sustainability project is a valuable long term realignment of community service funding, but community mental health needs a significant increase in financial resources immediately or the costs of acute hospital based care will continue to skyrocket.

There is no doubt that prevention and early intervention are both effective in client care, and cost effective. However, it would seem unlikely to achieve these benefits without additional investment. Currently the effective prevention and early intervention strategies provided by mental health services within the community sector are seriously underfunded, and it has been made clear that the funding envelope will not increase with the commissioning process. It is very possible that the funding of the entire mental health sector in the ACT is sufficient to meet the needs of consumers, but simply requires reallocation from acute government services to the upstream community based services.

It is important not to consider the community based mental health services as a discrete system - they exist within the wider mental health provision across the ACT. It would be beneficial to the wellbeing of the ACT community to consider commissioning the whole mental health system for the best outcomes, rather than restricting the process to the community sector. In that way, an extended scope of forecasting and system planning could contribute to a more integrated local mental health system where people in need no longer fell through the gaps.

Perinatal Wellbeing Hub

Our vision is the creation of a Perinatal Wellbeing Hub—a truly integrated, co-located centre that brings together a range of community-based health and support services tailored to the needs of new and expecting families. A centralised, multidisciplinary hub—featuring services such as our own, MACH nurses, physiotherapists, psychologists, social workers and others—would provide an accessible, streamlined experience for parents and caregivers, improving continuity of care, reducing fragmentation, and making it easier for clinicians to collaborate. Co-location not only reduces the burden on families who are already under strain but fosters more effective, holistic, and responsive care.

At present, we lease two adjacent standalone buildings from the ACT Government in Weston—a reasonably central and accessible location. As the Government already owns this land, it represents a practical and cost-effective site for the proposed Hub. Early construction estimates suggest a purpose-built, single-storey facility with basement parking could be delivered for under \$10 million.

Our current premises no longer meet our needs. With a significantly increased client load and the addition of more staff to support them, we have outgrown our space. Multiple daily group sessions add further pressure, highlighting the urgency of developing a purpose-built, future-focused facility that can meet current and projected demand.

Alternatively, co-locating the Hub with the Residential Mother-Baby Mental Health Unit could offer even greater integration of inpatient and community-based care, maximising the benefits of co-

location for clients and clinicians alike. This approach would foster smoother transitions between levels of care, reduce duplication of services, and support more coordinated workforce development and service planning.

With this centre of excellence in perinatal mental health, the ACT would have the opportunity to become a national leader in delivering comprehensive prevention, early intervention, and intensive support for the increasing number of families navigating perinatal mental health challenges.