

ACT Government Budget Submission: Connected Communities Program

Budget Proposal

Initiative

Connected Communities: Women's Chronic Pelvic Pain and Endometriosis Peer Support Program - ACT

QENDO Australia seeks **\$400,000 per annum for five years (\$2 million total)** to establish, deliver, and embed the **Connected Communities peer-led support and health navigation program** in the Australian Capital Territory.

This proposal is for the **rollout of an existing, nationally delivered, evidence-based program**, already funded through Commonwealth and state investment in other jurisdictions. The ACT funding would enable place-based delivery tailored to ACT-specific needs identified through formal government-led consultation.

The program provides:

- Structured peer-led support (online and in-person)
- Health system navigation and referral support
- Outreach to priority and under-served populations
- Workforce development through peer leader training
- Ongoing evaluation, reporting, and quality improvement

This is **service delivery funding**, not a pilot or program development request.

Target Population

The program will support:

- Women and people living with chronic pelvic pain conditions in the ACT, including endometriosis, adenomyosis and PCOS
- Individuals experiencing delayed diagnosis, fragmented care pathways, financial stress, and social isolation
- Priority populations identified through ACT consultation, including:
 - Aboriginal and Torres Strait Islander people
 - Culturally and linguistically diverse communities
 - LGBTQIA+ communities
 - People with disability
 - People required to travel interstate to access care

Based on national prevalence data, **approximately 26,000–27,000 people in the ACT live with endometriosis alone**, with many more affected by chronic pelvic pain conditions

 1800 ASK QENDO  info@qendo.org.au  [@qendoau](https://www.instagram.com/qendoau)  www.qendo.org.au

Evidence of Need

The ACT National Endometriosis Roundtable (2025) — the largest ACT-specific consultation on endometriosis and pelvic pain—identified **lack of community-based support, social isolation, and difficulty navigating the health system** as critical unmet needs requiring urgent investment.

Key findings included:

- Persistent diagnostic delays and inconsistent care pathways
- Limited access to multidisciplinary services within the ACT
- High out-of-pocket and indirect costs, including interstate travel
- Significant impacts on mental health, employment, education, and social participation
- Strong support for peer-led, community-embedded models to complement clinical care

Participants consistently reported that the absence of structured non-clinical support worsens health outcomes and increases reliance on crisis-driven services.

QENDO's previous ACT submission demonstrated:

- Over **90% of participants reporting mental health impacts**
 - Over **80% reporting inability to work or participate socially due to symptoms**
 - Clear unmet demand for locally delivered peer support and navigation
- ACT Budget Submission 2025-2026

Strategic Alignment

This proposal aligns with ACT Government priorities relating to:

- Chronic disease management
- Women's health
- Mental health and wellbeing
- Community inclusion and social participation
- Health equity and access

It directly supports:

- ACT priorities identified through formal consultation
- The National Action Plan for Endometriosis
- A preventative, community-based approach that reduces pressure on acute services



"Treatment is not just surgery and then done. We need ongoing community support without having to beg for help."



82%

Unable to attend work due to their endometriosis in the last year



85%

Unable to attend social function due to their endometriosis in the last year



92%

Reported endometriosis had impacted their mental health



93%

Reported their ability to exercise was impacted due to endometriosis



86%

Reported their eating habits were impacted due to endometriosis



89%

reported impacts on their ability to manage day to day

2024 SNAPSHOT DATA

1800 ASK QENDO

info@qendo.org.au

@qendoau

www.qendo.org.au

Funding Request

\$400,000 per year for five years (2026-27 to 2030-31)

A five-year funding term is essential to:

- Embed trusted, culturally safe community-based support
- Recruit, train, and retain peer leaders sustainably
- Establish stable referral pathways and partnerships
- Enable meaningful evaluation of outcomes and system impact
- Avoid service disruption caused by short-term funding cycles

The requested funding reflects the full cost of safe, scalable delivery, including staffing, safeguarding, outreach, evaluation, governance, and compliance.

Expected Outcomes and Benefits

Outcomes

- Reduced social isolation and psychological distress
- Improved health literacy and self-management capability
- Increased confidence navigating ACT and interstate health systems
- Earlier engagement with appropriate care and support pathways

Community and System Benefits

- Improved social and workforce participation
- Reduced reliance on emergency and crisis-driven services
- Stronger integration between community and clinical care

Organisational Capacity

QENDO Australia has over **35 years' experience** delivering peer-led, evidence-based programs for people living with endometriosis and chronic pelvic pain.

The Connected Communities model is currently delivered through:

- Commonwealth funding
- State-based service agreements
- PHN-supported programs

QENDO is an **ACNC-registered charity** with audited financial reporting, established safeguarding frameworks, and demonstrated capacity to deliver at scale.



1800 ASK QENDO



info@qendo.org.au



@qendoau



www.qendo.org.au

Cost of Inaction

Failure to invest in community-based support for people living with chronic pelvic pain and endometriosis will result in:

- **Increased demand on acute health services**, including emergency departments, due to unmanaged pain and distress
- **Ongoing workforce withdrawal**, reduced productivity, and increased reliance on income support due to untreated or poorly managed symptoms
- **Escalating mental health costs**, including anxiety, depression, and trauma linked to chronic pain and isolation
- **Continued inequity**, particularly for people required to travel interstate to access care, and for priority populations facing additional barriers
- **Missed opportunity to leverage existing national infrastructure**, resulting in higher future costs to build services from scratch

Given the significant economic burden associated with endometriosis and chronic pelvic pain, the proposed investment represents a **cost-effective, preventative intervention** that mitigates downstream expenditure across health, mental health, and social support systems.

This proposal represents a **targeted, evidence-based investment** in community connection, prevention, and quality of life for thousands of ACT residents living with chronic pelvic pain conditions.

The need has been clearly articulated through ACT consultation.

The program already exists.

The requested funding enables delivery.

Yours sincerely,


Jess Taylor
Chief Executive Officer
QENDO Inc
National Service Provider for Services and Programs

jessica@qendo.org.au

0434 106 341