



Perinatal Wellbeing Centre
6 Minns Place,
Weston ACT 2611

PO Box 4217, Weston ACT 2611

Support:
Phone: (02) 6288 1936
Email: support@perinatalwellbeing.org.au

Admin:
Phone: (02) 6287 3961
Email: admin@perinatalwellbeing.org.au

www.perinatalwellbeingcentre.org.au

**Submission to the
2026-27 ACT Budget Consultation**

Contact:

Dr Yvonne Luxford
Chief Executive Officer
Perinatal Wellbeing Centre
PO Box 4217
Weston ACT 2611
yvonne@perinatalwellbeing.org.au
Ph: 0420537211

Perinatal Wellbeing Centre has supported Canberra families for more than thirty years—yet has never been funded at a level that reflects the true scale of need in our community. In the past year alone, we provided direct care and support to more than 500 local parents. Recently we assisted more families than ever before, with client numbers peaking in the past 6 months.

Every single client reports that our evidence-informed programs improve their mental health and wellbeing. At the same time, our team continues to design and deliver new programs and workshops to respond to emerging community needs. Demand is rising and complexity is increasing, yet funding has not kept pace.

The cost-of-living crisis has driven anxiety among expectant and new parents to unprecedented levels, compounding the impacts of the earlier global pandemic and climate-related disasters. 2019 research estimates that 1 in 5 mothers and 1 in 10 fathers and partners experience perinatal depression and anxiety. If recalculated today, those figures would almost certainly be higher.

Modelling by PwC Consulting indicates that for each annual birth cohort, perinatal mental ill-health costs the Australian economy \$877 million in the first year of a child's life and \$7.3 billion over that child's lifetime. These figures alone demand urgent action.

Yet the economic costs only tell part of the story. The human costs are profound and enduring: ongoing mental and physical health challenges, family breakdown, workforce exit, and intergenerational disadvantage.

Impacts on children include:

- Increased risk of low birth weight and premature birth
- Increased likelihood of childhood injury
- Reduced immune system response
- Increased likelihood of asthma and respiratory conditions
- Increased exposure to childhood trauma
- Increased likelihood of neurodevelopmental issues
- Increased risk of depression
- Increased risk of anxiety
- Increased risk of ADHD

Impacts on parents include:

- Increased use of primary and community health services
- Increased hospital admissions
- Greater risk of chronic disease
- Increased substance misuse
- Workforce exit
- Absenteeism and presenteeism
- Lower quality of life
- Increased risk of suicide

Prevention and early intervention are not optional extras—they are the most effective and cost-efficient solutions available. The services delivered by Perinatal Wellbeing Centre sit precisely at this critical point of impact.

Residential Mother-Baby Mental Health Unit

We strongly welcome the inclusion of a residential perinatal mental health facility in the 2024 election commitments and urge that its construction be funded in the 2026 Budget.

Currently, ACT parents requiring inpatient perinatal mental health care must travel to Sydney private hospitals to access appropriate support—an unacceptable burden at a time of acute vulnerability. Canberra families deserve local, accessible, specialist inpatient care.

Funding the construction of an inpatient perinatal mental health facility is a logical and necessary progression from the current feasibility study and the scoping study funded two years ago. The groundwork has been laid. Now is the time to deliver.

It is essential that the model of care integrates community mental health providers alongside acute services delivered by Canberra Health Services. Inpatient care alone is not enough—continuity of care across hospital and community settings is critical to long-term recovery.

Antenatal Wellbeing Workshops

The revision of the workplan for the Maternity in Focus Strategy presents a powerful opportunity to embed mental wellbeing into routine antenatal care across the ACT.

Perinatal Wellbeing Centre has developed an outreach psychoeducation program at Centenary Hospital, delivering monthly two-hour Antenatal Wellbeing Workshops facilitated by our specialist Perinatal Mental Health team.

Boosted by philanthropic funding, the program has operated since September 2024 with an average of 13 participants per session. The results are unequivocal:

- 100% of pregnant respondents reported the workshop would enhance their wellbeing.
- 100% reported the sessions were professionally facilitated.

Participants consistently report gaining practical tools, knowledge, and confidence to navigate the transition to parenthood. The program has been refined through continuous feedback and evaluation and is now also offered to parents birthing at Calvary John James hospital.

As a recent pregnant mother commented – *‘this workshop should be available to all expectant families’*.

This is prevention in action. Rolling these workshops out on an ongoing basis across both public hospitals would be a modest investment with significant long-term health and economic returns.

Perinatal Wellbeing Hub

Our vision is clear: the creation of a Perinatal Wellbeing Hub—a fully integrated, co-located centre bringing together community-based health and support services for new and expecting families.

A multidisciplinary hub incorporating services such as MACH nurses, physiotherapists, psychologists, social workers, and specialist perinatal programs would:

- Improve continuity of care
- Reduce service fragmentation
- Streamline access for families

- Enhance interdisciplinary collaboration

The ACT Government already owns the land on which our current Weston premises sit. A purpose-built, single-storey facility with basement parking could be constructed for under \$10 million—a modest capital investment with transformative potential.

Our current buildings are no longer adequate. Rising demand, increased staffing, and multiple daily group programs have pushed the limits of our space. Additional stressors are placed on service delivery due to the poor maintenance of our buildings – noting that this year we suffered through four months of a freezing winter without heating repairs being undertaken, followed by a month in the height of summer with broken air conditioning. The ceiling and lights continue to be damaged due to the air conditioning leak.

Co-locating the Hub with the proposed Residential Mother-Baby Mental Health Unit is a possibility that could deliver even greater integration—strengthening transitions between inpatient and community care, reducing duplication, and enabling coordinated workforce planning.

With the Perinatal Wellbeing Hub as the centre of excellence, the ACT has the opportunity to become a national leader in perinatal mental health—delivering prevention, early intervention, and intensive care within a cohesive, integrated system.

The need is clear and the evidence is compelling.

Commissioning of the Community Mental Health Sector

The community-managed mental health sector delivers approximately two-thirds of ACT mental health services yet receives only 13% of total mental health funding.

This imbalance is neither efficient nor sustainable.

If prevention and early intervention are priorities—as they should be—funding must reflect that commitment. Continuing to concentrate investment in acute hospital-based care while underfunding community services guarantees escalating costs and avoidable crises.

Community services such as Perinatal Wellbeing Centre achieve strong outcomes at comparatively low cost. The current commissioning process must consider the entire mental health system, not treat community services as a separate or secondary stream.

Reallocation toward upstream, community-based services would:

- Reduce pressure on acute systems
- Improve continuity of care
- Prevent individuals from falling through service gaps
- Deliver better long-term economic and social outcomes

Without immediate additional investment or reallocation, the costs of acute care will continue to escalate unnecessarily.

Perinatal Wellbeing Centre continues to value the ongoing support of the ACT Government and sense of partnership we have developed with the Mental Health Policy team which has been strengthened through initiatives such as the Perinatal Mental Health Reference Group.

However, we are deeply concerned by the inadequacy of projected future funding through the commissioning process.

The recently released Strategic Investment Plan states that \$13.8m is available at 2025-6 indexed rates, of which only \$2.7m will be available to be shared amongst services for the child, youth and family sector.

In February 2021 ACTHD released *Commissioning of Health Services in the Community: Discussion Paper* which clearly stated, 'We are approaching the first round of commissioning with a fixed funding envelope which is the same as the current allocation of health spending through community health service providers' p3. This position of a fixed funding envelope was reiterated in subsequent documents and at various workshops and webinars.

Given the government's acceptance of the Counting the Costs report's evidence that community sector providers were existing in a starvation cycle, the fixed funding envelope did not appear to match the future focused rhetoric of the commissioning project. However, it was a position that was maintained throughout all discussions.

In November 2022 ACTHD released *Commissioning in the Mental Health Sector* where they clarified that 'The range of mental health NGO services that are in scope include funding arrangements with 24 different organisations for the delivery of mental health services. Over 2022-23, these funding arrangements provide for nearly \$16 million in services delivered across the ACT' p5.

The draft Strategic Investment Plan released in April 2025 stated that, 'In 2024-25, \$14.49 million of this funding is subject to the current commissioning process' p19.

Since 2022-23 the indexation rates have been 5.25% 2023-24; 3.6% 2024-25; then 3.35% 2025-26. This would mean that the 'nearly \$16m' which was available in 2022-23 would now be over \$18m in 2025-26, not \$13.8m.

The difference of over \$4m is significant. To a sector struggling with ever increasing costs and service demands it could be the difference between being able to provide the care and support that local Canberrans need, or not.

We have been active participants in the commissioning process, but the sector needs the funding envelope to support success.

Development of Peer-Led Programs

Peer-led programs are not a "nice to have"—they are a powerful, evidence-based complement to clinical care. Parents who have navigated perinatal mental health challenges bring credibility, empathy, and hope that cannot be replicated in traditional service models.

As articulated by the Scottish Recovery Network, peer support is "not about fixing people—it's about walking alongside them and sharing strength, experience, and hope." That philosophy underpins our approach.

Peer support:

- Reduces stigma
- Increases engagement with services
- Builds trust
- Reaches parents reluctant to seek traditional care
- Reduces long-term reliance on intensive clinical interventions

With additional investment, we could expand structured peer groups, one-on-one support, and co-facilitated psychoeducation programs. We could also build training and employment pathways for people with lived experience—strengthening both recovery outcomes and workforce capacity.

Funding peer-led programs is both compassionate and strategically sound.

MACH New Parents Groups Expansion

Loneliness and isolation are strongly linked to perinatal depression. Research consistently demonstrates that loneliness is central to many women’s experience of postnatal depression. Validation, peer connection, and practical family support are protective factors.

These principles are embedded in the programs delivered by Perinatal Wellbeing Centre—from telephone counselling to group programs and partner education evenings.

New Parents Groups delivered by the Maternity and Child Health team at Canberra Health Services are another vital protective strategy. However, they are currently limited to first-time parents of infants aged 6 weeks to 4 months.

With the ACT population increasing by nearly 10,000 residents annually, many families are excluded—parents who have relocated from interstate or overseas, or who have significant gaps between children.

Expanding access to all new parents within the eligible age range would be a relatively small investment with substantial preventive benefit. It would strengthen social connection, reduce loneliness, and decrease the likelihood of more costly downstream interventions.

Professional Development for the Community Sector

The 2021 Counting the Costs Report found that 75% of ACT community sector organisations are unfunded or underfunded for adequate professional development.

This is unsustainable.

Without access to training and education:

- Staff recruitment and retention suffer
- Career pathways stagnate
- Workforce skills erode
- Service quality declines

Meanwhile, ACT Government employees have access to extensive training opportunities.

We recommend that online professional development programs be made available to community sector staff at no cost, with a proportion of in-person training places reserved at minimal or no cost. This is a low-cost reform that would strengthen workforce capability, improve client outcomes, and foster collaboration between government and community providers.