



Submission to the ACT Budget 2025-26

February 2025

Karinyahouse
for mothers & babies

Karinya House recognises the rights of Aboriginal and Torres Strait Islander peoples to own and control their cultures and pay our respect to these rights. Karinya House acknowledges, respects and seeks to learn from the diversity of Indigenous cultures, Indigenous world views, lifestyles and customary laws.

We extend our respect to Aboriginal and Torres Strait Islander peoples who for thousands of years have preserved the cultures and practices of their communities on Country.

This land was never surrendered, and we acknowledge that it always was and will continue to always be Aboriginal land.

About Karinya House

Every woman who is pregnant or parenting should be surrounded with the support she needs. However, not every woman has safety, shelter, or a positive support network.

Karinya House stands as a beacon of hope and support for women who are pregnant or parenting a baby, ensuring they are never alone in their journey. We deeply value each woman's unique experiences and are committed to offering practical assistance and empowering opportunities that foster self-confidence and personal development. Our professional services and facilities are tailored to meet the diverse needs of the women we walk alongside, creating a safe haven where women can thrive. At Karinya House, we believe in nurturing a community of care and compassion, providing a sanctuary where women can grow, heal, build hope and plan a future for themselves and their families.

Karinya House walks with women in Canberra and the surrounding Region. A local, not for profit organisation, the Karinya House funding framework is a true cooperative of individuals, families, community groups, corporates, philanthropic and government funding partners. This cooperative approach to funding is a tangible expression of positive recognition of women in our community, who are pregnant or parenting.

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Executive Summary

Karinya House is committed to working in partnership with Government and community to improve outcomes for women who are pregnant or parenting, and their babies and children, in the ACT region. In our 2025-26 Budget Submission, we highlight five key areas of need:

Proposal 1: Establish a Commissioner for the Perinatal and Early years in ACT

Fund establishment of a Commissioner for the Perinatal and Early Year's period as per Recommendation 33 in the Inquiry into Raising Children in the ACT.

Proposal 2: Carry over funding commitment for a Perinatal Mental Health Facility & Supports

Ensure election commitments LAB072C and LAB07C (capital works and staffing for perinatal mental health) are costed in the 25-26 budget, without reducing funding to any other element of the Maternity in Focus plan. We also encourage Government to co-design the facility and "safe spaces" with community providers to avoid duplication and meet need.

Proposal 3: Help end homelessness for pregnant and parenting women with babies/ children

Co-invest in an innovative pilot of five community-based dwellings for pregnant and parenting women who are homeless or at risk of homelessness, providing them with a transformative pathway out of homelessness to housing security and wellbeing. This pilot will help end homelessness for all pregnant and parenting women with newborns in the ACT, which is achievable within a generation and with a modest co-investment from Government and community.

Proposal 4: Improving Data Collection

Obtain an accurate picture of the number of women, and their babies and infants, in the ACT region who are pregnant or parenting and are homeless or in insecure living situations and/or who are experiencing domestic and family violence.

Proposal 5: Commit to offering continuity of care to all women and pregnant people in the ACT by 2032 and piloting a birth companion program for pregnancy loss.

Ensure election commitment LAB023 (funding 16 new Registered Midwives to scale continuity of care to 50% by 2028) is carried across in are costed in the 25-26 budget, without reducing funding to any other element of the Maternity in Focus plan. Also resource additional efforts to attract, train, retain and then remunerate additional Midwives to offer continuity of care to all eligible women in the ACT by 2032. Also include funding for the pilot of a birth companion program for women experiencing pregnancy loss, as announced as an election commitment in September 2024.

Proposal 6: Homelessness service resourcing and recognition

Extend the Community Sector Funding Boost for homelessness services beyond 2026, is rolled into base line funding and subject it to indexation, to ensure homelessness services can meet the needs of vulnerable Canberrans.

Proposals

Notwithstanding concerted effort from Government and community alike, gaps and barriers to women accessing appropriate care in the perinatal period remain in the ACT. Demand for perinatal services also continues to be high and is likely to increase beyond current levels¹. Our five recommendations focus on immediate actions that can improve access and quality of care for women and birth parents, and their babies and children, in the ACT.

Proposal 1: Establish a Commissioner for the Perinatal and Early years in ACT

The ACT Government has many initiatives aimed at the first 1000 days period, however these policies are often siloed and mandates dispersed. This makes it difficult to track progress against the 1000 Days Strategy goals, to ensure that all parts of government and community (e.g. housing, domestic violence services) are working meeting the needs of women in the perinatal period, and to fill urgent gaps in the service system for women and birth parents.

We encourage Government to accept Recommendation 33 of the Raising Children Inquiry and fund establishment of a Commissioner for the Perinatal and Early Years period. A Commissioner would “...provide oversight for the mother or birthing parent, baby and family for the first 1000 days”. The Commissioner could also identify gaps in the legislative, policy and service landscape for women and propose measures to rectify these. The Commissioner would promote the needs and rights of women and carers, as well as their babies/ infants – a cohort which is currently missing in the Human Rights landscape and Commissioner framework in the ACT. We are open to this role being integrated the proposal for a Future Generation’s Commissioner, provided the functions are resourced fully and not diluted. Additional information on the Commissioner proposal is [here](#).

Policy alignment: ACT Wellbeing Framework, First 1000 Days Strategy and Action Plan, Maternity in Focus Strategy 2022-2032, Best Start for our Kids.

Budgetary implications: Funding for Commissioner position, plus associated on-costs and support staff in 2025-26, plus annual recurrent funding beyond that.

Proposal 2: Carry over election commitment for a Perinatal Mental Health Facility & Supports

There is no specialist perinatal mental health facility in the ACT region for women and birth parents experiencing acute perinatal or pregnancy loss mental health complications. Women are therefore not receiving appropriate care, or in some cases having to choose between receiving in-patient care or being separated from their baby. There is an urgent need for a residential perinatal mental health facility where women can remain with their babies/ support networks, and a fully resourced

We welcome Government’s election commitment to build and staff a specialist facility that also includes a community-based support centre. We now encourage Government to ensure election commitments LAB072C, LAB072, LAB074, LAB074C, LAB075, LAB075C (capital works and staffing for perinatal mental health facility and safe spaces) are included in the 25-26 budget, without reducing

¹ Despite low fertility rates, high inward migration to Canberra coupled with population growth and continued rental / housing stress and domestic family violence factors are projected to increase both the number of women giving birth in the ACT over the next few years as well as the number of women experiencing one of more vulnerabilities during the perinatal period (reference: Strategic Development Group Demand Analysis 2024).

funding to any other element of the Maternity in Focus plan.

We also encourage Government to co-design the facility and “safe spaces” with community providers who are already providing similar services in this space, including exploring options whether the model is best delivered in partnership with or through existing providers to avoid duplication and ensure women’s needs are met in the way they want during the perinatal period.

Policy alignment: ACT Wellbeing Framework, Best Start Strategy, Maternity in Focus System Plan 2022-2032, Maternity in Focus First Action Plan 2022-2025.

Budgetary implications: Election commitments LAB072C, LAB072, LAB074, LAB074C, LAB075, LAB075C need to be carried across into 2025-26 budget without impacting other funding for Maternity in Focus actions.

Proposal 3: Invest in a specialist build for pregnant and parenting women with babies/ children

Co-invest in an innovative pilot of five community-based dwellings for pregnant and parenting women who are homeless or at risk of homelessness. For a small financial investment and allocation of a small number (e.g. 5) semi-independent and preferably co-located public housing properties, this pilot, in partnership with Karinya House, community housing partners and other investors, will provide vulnerable women with a transformative pathway out of homelessness to housing security and wellbeing. It will also support women to build independence and a semi-intentional community. If successful, the pilot would become self-sustaining after 2-3 years, and produce a model for potential replication with further investment across the ACT, delivering benefits for women, children and for the community more broadly. This pilot will be a significant step towards ending homelessness for all pregnant and parenting women with newborns in the ACT, which is achievable within a generation and with a modest co-investment from Government and community.

Policy alignment: ACT Wellbeing Framework, Best Start Strategy, Maternity in Focus System Plan 2022-2032, Housing Strategy (including election commitments relating to social and public housing).

Budgetary implications: allocate a small number (e.g. 5) semi-independent and preferably co-located public housing properties, along with \$120-140,000 annually over 2-3 years. Karinya House and other partners would co-invest a similar amount of their own resources to make the project viable.

Proposal 4: Improving Data Collection

We do not know how many women who are pregnant or parenting babies, or the number of babies and infants, that are homeless or in crisis in the ACT. It is imperative that we obtain an accurate assessment of need in order to ensure that no woman, baby or infant is homeless or unsupported in our region. There are multiple points at which Government could consider extracting, obtaining then publishing this information from existing or adapted data collection sources – for example; at women’s first midwifery appointment, at hospital discharge or through the Maternity Satisfaction Survey.

Policy alignment: ACT Wellbeing Framework, Best Start Strategy, Maternity in Focus System Plan 2022-2032, Maternity in Focus First Action Plan 2022-2025.

Proposal 5: Scaling up Continuity of Care for women, and Birth Companionship for those experiencing pregnancy loss.

We welcome Government's election commitment to fund its goal of expanding midwifery-led continuity of care to 50% of all eligible women by 2028 (LAB023), by funding 16 new full-time Registered Midwifery positions; and encourage Government to ensure this is carried over into the 2025-26 Budget.

Given the unequivocal positive health and wellbeing outcomes that continuity of care delivers, we also encourage Government to set a more ambitious target of offering expanding midwifery-led continuity of care to 100% of all eligible women in the ACT by 2032. This may require small immediate and additional investments in work to attract, recruit, remunerate and train/ retain midwifery or potential midwifery students now to be able to supply a workforce pipeline to meet this goal in 2032. Estimates for the number of midwives required by 2032 could be drawn from average birth rates, patient ratios, indexation rates and projected population growth in the ACT.

The Government also publicly committed, in September 2024, to fund the pilot of a birth companion program for women and birth parents experiencing pregnancy loss. We encourage Government to ensure that this pilot is fully costed in the 2025-26 budget.

Policy alignment: ACT Wellbeing Framework, Best Start Strategy, Maternity in Focus System Plan 2022-2032, Maternity in Focus First Action Plan 2022-2025.

Budgetary implications: Election commitment LAB023 needs to be carried across in full into the 2025-26 budget, as well as any additional investments required to bolster attraction, student recruitment, remuneration and training of mid-wives to then meet a 100% coverage rate by 2032 – and to cover the birth companion program pilot.

Proposal 6: Homelessness Sector Resourcing and Recognition

The ACT Government's Community Sector Funding Boost (the Boost) has proven welcome and critical to the homelessness sector, and our ability to support vulnerable Canberrans who are homeless, experiencing housing insecurity or are at risk of homelessness. It has enabled services such as Karinya House to manage increased wage and infrastructure costs of operating in the ACT.

However, the Boost is only committed until 30 June 2026. We encourage the Government to therefore:

- Roll the Boost into recurrent funding allocations for services in FY25/26 (which would subject the Boost to indexation rates) rather than treating the Boost as a separate line, and;
- Extend the Boost beyond 2026.

By way of example, without the additional Boost and the lack of indexation, the annual funding impact beyond 30 June 2026 would be a decrease of around \$100,000 in Karinya House funding. A reduction in ACT Government funding of this amount, would likely impact our staffing profile and may impact our ability to meet demand amongst pregnant and parenting women in the ACT region.

Policy alignment: ACT Wellbeing Framework, Best Start Strategy, Housing Strategy (including election commitments relating to social and public housing).

Budgetary implications: roll the Boost payment for 2025/26 into baseline funding and subject it to indexation, then continue it for all homelessness services beyond 30 June 2026.

[karinyahouse.asn.au](https://www.karinyahouse.asn.au)