

# Neonatal Critical Care ALLIANCE



A call for additional paid parental leave for families of babies requiring extended hospitalisation at birth

A more fair and equitable Australia for our most vulnerable babies and families

# Statement

## Neonatal Critical Care ALLIANCE



*Following a petition with the Australian Government in 2023, reaching **10,000+ signatures in 4 weeks**, dozens of organisations and health care professionals pledging their support, the Alliance (consisting of Miracle Babies Foundation, University of Melbourne, Tresillian, Heart Kids, Cerebral Palsy Alliance, Birth Trauma Australia, PANDA, AMBA, Red Nose and the FIFO Family Project) urgently call on the Government to escalate the needs of thousands of vulnerable Australian families with newborns spending extended time in specialised hospital care at birth. Greater financial support, to alleviate stress and mental health risks need to be prioritised, to ensure these babies and families have a fair and equal chance of thriving.*



# The impact of having a baby born early or unwell

Having a baby born early (preterm) or unwell is a stressful and challenging time for families. Babies can be in hospital for many weeks and months, facing potentially long-term health and other challenges. While parents can struggle emotionally and financially which can further impact child development.



THE UNIVERSITY OF  
MELBOURNE

## the research shows:

### ANXIETY & DEPRESSION



8 out of 10

Report moderate, severe or extreme levels of anxiety or depression during their baby's hospital stay

### FINANCIAL IMPACT



3 out of 4

Report a moderate to very large financial impact due to their baby's extended hospital stay

### HEALTHCARE COSTS



9 out of 10

Report costs associated with direct medical care in their child's first year of life as having a moderate-very large financial impact

# Our call

- To support families with a baby in extended neonatal care, in a way that is fair and acknowledges their unique needs.
- Implement **extended Paid Parental Leave** (or a Neonatal Critical Leave payment) to ensure parents are well supported financially, which will positively impact mental health during their baby's neonatal stay.

While the extension of Paid Parental Leave to 26 weeks (6.5 months) for all Australian families is applauded, we raise the impact of the lack of additional support, proportionate to the unique journey of a family with a baby hospitalised for extended periods at birth, some of which may have spent 4-5 months in hospital with their newborn.

*"Our first baby was born at 26 weeks and spent 115 days in NICU. My husband had to return to work while I spent each day at the hospital. Having to uphold income for the family, juggle work and drive me back and forth to the hospital each day, really affected his mental health during an already stressful time. Had there been longer paid parental leave, our family would have been better supported, allowing both of us to be there for our baby when we needed to be there. It was 17 weeks that our daughter was in hospital. For families like ours, the current leave is nowhere near enough."*

-Rosanna, Miracle Mum



# Families need support to remain with their babies during a critical developmental period

For preterm or sick newborns, the crucial period after birth involves some of the most rapid and complex phases of brain development.

Research shows that while the optimal environment is the nurturing care of family at home, having parents consistently present in the hospital and removing barriers like financial constraints or work obligations, is the next best step to optimise their neurological growth.

**This additional financial support will ensure that parents can be at the hospital for:**



Skin-to-skin contact - increases parent-infant bonding, reduces stress and promotes growth.

Mothers needing to provide breastmilk for their babies in care



“More **parent holding in the NICU** was related to better neurobehavior prior to NICU discharge.

More **skin-to-skin care in the NICU** was related to better gross and fine motor skills at 4–5 years.”

Early Hum Dev. 2017 Dec 21;117:32–38.

**Being by side their side is also critical for their mental health.**

# Timeline to action

**2020+**  
Community  
listening

- **Miracle Babies Foundation Partnered with University of Melbourne and (NHMRC) Centre for Research Excellence in Newborn Medicine** on key research
- 100+ family stories gathered between 2020 and 2025
- Letters of support gathered from Health Care Professionals.

**2025**  
Alliance formed  
for Neonatal  
Critical Care  
Payment

- National Petition launched 2023 via **Australian Government. 10,000+ signatures** from families and health professionals received
- Ongoing discussions, findings and proposal presented to key Ministers between 2020 and 2025
- Mid 2025, the Neonatal Critical Care **Alliance was formed, consisting of Miracle Babies Foundation, University of Melbourne, Tresillian, Heart Kids, Cerebral Palsy Alliance, Birth Trauma Australia, Red Nose and PANDA.**

Roundtable  
discussion  
with key  
personnel

**5 November 2025 - Round Table discussion with key members of Parliament** to explore opportunities for greater support, with the intention to achieve additional financial funding for families navigating the difficult experience of having their baby in hospital for weeks or months at birth.

**2026:** Develop an action plan with Parliament

# Supporting Organisations

In support of this important change include organisations such as:



Ronald McDonald House Charities® Australia



supporting families of premature babies



Red Blood Comic®



Immunisation Foundation of Australia



ICOMBO INTERNATIONAL COUNCIL OF Multiple Birth Organisations



Down Syndrome Australia



MENINGITIS CENTRE AUSTRALIA

Raising awareness. Every second counts.



SAHMRI South Australian Health & Medical Research Institute

SAHMRI WOMEN AND KIDS



life's little treasures foundation

Supporting Families of Premature & Sick Babies



murdoch children's research institute



PANDA Perinatal Anxiety & Depression Australia



global alliance for newborn care



Australian Red Cross Lifeblood



the women's the royal women's hospital victoria australia



Waipapa Taumata Rau University of Auckland



COPE Centre of Perinatal Excellence

BabyLove®



global foundation for the care of newborn infants



MONASH University



JAMES COOK UNIVERSITY AUSTRALIA



AIMH



THE FIFO FAMILY PROJECT

# Supporters Cont.



AUSTRALIAN  
Preterm Birth  
Prevention  
ALLIANCE



Grace  
Research Unit

Perinatal Mental  
Health Alliance



# The Cost

Of the estimated 280,000 births each year, approximately 15,000 babies require hospitalisation for more than 2 weeks.

**The proposal:** For families with babies spending more than 2 weeks in hospital, an additional 1 week of pay per week be granted (up to 14 weeks).

Plus, a capped additional 2 weeks for Dad/Partner.

Based on the current primary and secondary carer workforce rates we would expect about one-half of these families to take up the proposed scheme.

The cost would be approximately  
\$44 million -  
less than 1% of the 2026-2027  
allocated budget.

However, saving the Government up to  
\$54 Million in Mental Health funding.



# Who will this help?

## **Babies born before 37 weeks:**

- Around 40% of multiples will spend 6+ days in hospital
- 1 in 35 babies born premature will have Cerebral Palsy
- Rural and regional families hours away from home for weeks/months due a premature birth
- Aboriginal families - 75% more likely to have a baby born premature

## **Plus, all babies requiring specialised care beyond 2 weeks due to sickness at birth.**

Other conditions requiring the need for specialised care:

- Hypoxic Ischaemic Encapthalopathy HIE
- Hydrocephalus
- Myelomeningocele
- Neonatal Abstinence Syndrome
- Neonatal Sepsis
- Heart Conditions



# Special leave payments already in place

## **Australian Public Service Commission -**

Paid premature birth leave is available from the date of birth to what would have been 37 weeks' gestation **for Australian Government employees.**

"Under the new enterprise agreement, Lara and James will get 5 weeks paid premature birth leave, as well as the paid parental leave increases." <https://www.apsc.gov.au/aps-news/parental-leave-what-could-you-get>



The time parents anticipated would be spent at home, bonding with their child, can be impacted as paid leave may be fully exhausted. Picture: Getty Images

## **INCREASING SUPPORT FOR ALL FAMILIES**

**Families overseas are already supported** [↗](#) by extended paid parental leave. The New Zealand Government has a preterm baby payment allowing parents of babies born before the end of 36 weeks gestation to access additional leave payments of up to a maximum of 13 weeks depending on gestational age at birth.

In Canada, a 'Parents of Critically Ill Children' benefit is available for babies born preterm or sick with a life-threatening illness or injury who require ongoing parental care or support, allowing up to 35 weeks of additional benefits.

# Join others in support of our message

“ Every day in my role as consultant RN in the Neonatal Intensive and Special Care unit I see parents that are impacted financially and professionally by the sudden, unexpected preterm birth of their baby. Both mothers and fathers juggle meeting the comfort and safety parenting needs of their preterm hospitalised infant, and the financial pressure that requires them to continue to work during this very stressful, demanding time ”

*Megan Bater, Neonatal Nurse*

“It's essential that we support families to be with their babies during this critical period of development. We need to value the important role families have in their baby's development. Financially supporting parents to be with their baby during hospitalisation is an investment in the future of our nation.”

*Professor Alicia Spittle | Associate Dean Research  
Faculty of Medicine, Dentistry and Health Sciences*

*NHMRC Career Development Fellow/ Dame Kate  
Campbell Fellow  
Department of Physiotherapy, Faculty of Medicine  
Dentistry and Health Sciences*

My daughter was born at 31 weeks due to unexpected pre eclampsia/ HELLP syndrome. I had to start my Maternity leave straight away and my partner took no leave from his two jobs. We were in hospital for 5 weeks and the following weeks spent on maternity leave were stressful because of complications which meant the remaining weeks were not an enjoyable bonding experience. More paid leave would have made a big difference to our family.

-Melissa, Miracle Mum

By the time we were able to take our beautiful boy home, I had exhausted the majority of my paid parental leave. The thought of returning to work after just a matter of weeks with him at home was distressing and we made the decision that I would stay at home while my husband went back to work. This was an incredibly stressful time for our family only exacerbated by the fact that we were trying to get by on a single income. The current scheme left me feeling incredibly isolated and stressed.

-Rosie, Miracle Mum



Harley, 30 weeks



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