

Bridging the Child Bereavement Gap

A Strategic Framework for National Employment Standards (NES) Reform

A Joint Submission by:

The Compassionate Friends Australia (TCFA)

*Representing TCF Queensland, TCF Victoria, TCF New South Wales, TCF
Western Australia (Mandurah), and TCF South Australia.*

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Employment, Workplace Relations, Skills and Training
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Standards**

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Submitted by: Peter Hobson (National President, TCFA & President, TCFQ)

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Presidents' Statement of Support

The Compassionate Friends (TCF) are peer-led support organisations for bereaved parents and their families following the death of a child at any age and from any cause.

In Australia, there are TCF state-based organisations in the ACT, New South Wales, Queensland, South Australia, Victoria and Western Australia. TCF Victoria supports members from the Northern Territory and Tasmania.

TCF Australia is a national organisation that fosters collaboration and cooperation across the states. This submission is endorsed by the Presidents of The Compassionate Friends across Australia. We speak as a unified national voice for the thousands of parents and families our state branches support daily.

The death of a child is a catastrophic and life-altering event. However, our current National Employment Standards (NES) offer only two-days of compassionate leave following the death of a child. Based on the lived experience of the families we support, this statutory minimum does not reflect the acute trauma and practical demands associated with the death of a child. Through the lived experiences of our members, we have observed that this lack of structural protection leads to avoidable job loss and long-term mental health deterioration.

We urge that Parliament recognise the inequity and act with compassion and fairness by legislating the reforms proposed in this document.

Signed,

Peter Hobson	National President, The Compassionate Friends Australia
	President, TCF Queensland
Christy Roberts	President, TCF Victoria
Chris Hardwicke	President, TCF New South Wales
Gary Withers	President, TCF Western Australia (Mandurah)
Deborah Morgan	President, TCF South Australia



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Executive Summary

The Compassionate Friends Australia (TCFA) identifies a significant and inequitable "Child Bereavement Gap" within the current Australian industrial relations framework. While recent reforms have appropriately strengthened protections following stillbirth and infant loss, equivalent protections do not extend to parents of school-aged or adult children.

This submission proposes a **Three-Stage Reform Framework** to ensure Australia's workplace laws reflect a contemporary understanding of trauma and equity:

1. **Short-Term Reform:** Increase the statutory floor for child bereavement leave from two days to **ten days**, aligning it with existing standards for Family and Domestic Violence Leave.
2. **Medium-Term Reform:** Introduce institutional protections to address the "carer's penalty," protect psychological safety through a "Right to Reassignment," and fund specialised research into best-practice workplace responses.
3. **Long-Term Reform:** Establish a government-funded **12-week Parental Bereavement Leave**, modelled on the Paid Parental Leave scheme, to provide a vital financial circuit-breaker for bereaved families.

Closing this gap will:

- Reduce long-term mental health risks
- Protect workforce participation
- Reduce downstream social security and healthcare costs
- Ensure no parent is forced to choose between employment and grief



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1.0 The Case for Reform: Addressing the Child Bereavement Gap

The death of a child is a catastrophic and life-altering event with profound and enduring impacts on parents, families, workplaces, and communities. While Australia's industrial relations framework has evolved to better support parents following stillbirth and early infant death, a significant and inequitable gap remains for parents whose child dies beyond early infancy.

Recent reforms to the *Fair Work Act* — including the 2020 unpaid parental leave amendments and the introduction of **Baby Priya's Law in 2025**^[1] — appropriately recognise the devastating consequences of infant loss. However, these changes have resulted in an inconsistency within the national Employment Standards.

Parents whose newborn or infant child dies may now access extended parental leave protections, while parents whose school-aged or teenage child dies are typically entitled to only **two days of compassionate leave**^[2] under the National Employment Standards (NES).

This distinction is difficult to reconcile with contemporary evidence, principles of equity, and the lived experience of bereaved families.

- The death of a child at any age is a profound trauma with long-term consequences for parents' mental health, physical wellbeing, and capacity to work.
- Two days of compassionate leave does not realistically allow parents to manage the immediate practical, legal and psychological demands that follow the death of a child.

"After losing our daughter at age 8, the days turned into weeks of shock, numbness and trying to navigate funeral arrangements, school notifications, and constant appointments. Two days of leave felt like a cruel joke. Returning to work before I was ready only made the grief deeper, the anxiety heavier, and the exhaustion almost unbearable."

— Parent, TCF Victoria



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1.1 Strategic Objectives

The Compassionate Friends Australia (TCFA) proposes a three-stage reform framework to ensure that Australia's workplace laws reflect a contemporary understanding of trauma and grief:

- **Short-term reform** to provide immediate relief through a statutory increase in compassionate leave in the form of child bereavement leave.
- **Medium-term reform** to protect bereaved parents from systemic barriers, such as the "carer's penalty" and coronial processes.
- **Long-term reform** to establish a comprehensive, evidence-based national framework that supports a safe and sustainable return to work.

By closing the "child bereavement gap," we ensure that no parent is disadvantaged because of the age of the child that has died.

"After months of hospital care for my child, I had exhausted all annual leave, personal leave, and long service leave before my child passed away. I was forced to work through the toughest period of my life in order to avoid financial ruin."

— Parent, TCF South Australia



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2.0 Short-Term Reform

2.1 Goal: Immediate Relief

The primary objective of short-term reform is to provide an immediate statutory safety net during the acute shock phase following the death of a child.

Based on TCFA's collated lived experience evidence in Appendix A, the current two-day provision is insufficient to allow parents to manage funeral arrangements, legal processes, family needs, and acute psychological distress.

TCFA proposes increased, protected leave entitlements for bereaved parents:

- Additional paid leave beyond current compassionate leave provisions
- Protection from adverse action or termination during bereavement leave
- Flexibility in access (continuous block or staged use)
- Access regardless of employment status or length of service

Extended leave should be framed not only as compassionate reform, but as preventative workforce policy. In the absence of structured leave, parents may resign, retire prematurely, or disengage from employment entirely.

2.2 The 10-Day Statutory Floor

TCFA calls for a direct amendment to the National Employment Standards (NES) within the *Fair Work Act 2009* ^[3]:

- **Legislative Change:** Increase compassionate leave specifically for the death of a child from the current **two days** to a minimum of **ten days**.

This leave should:

- Apply to all employees
- Be immediately accessible
- Protect income and job security during the initial bereavement period

"Ten days wouldn't have 'fixed' my grief, but it would have given me enough time to arrange the funeral and handle the police and coronial paperwork without the constant, crushing pressure of a 48-hour deadline hanging over my head."
— Parent, TCF Victoria



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2.3 The Parity Argument

This proposal is not without precedent in Australian industrial relations. TCFA argues for parity with the **Family and Domestic Violence Leave**^[4] provisions:

- Similar to family and domestic violence, the death of a child represents a high-impact personal and social crisis that requires more than two days absence from the workplace.
- Establishing a 10-day floor ensures the NES remains coherent by treating comparable levels of trauma and administrative necessity with equal weight.
- Aligning child bereavement leave with this standard ensures internal coherence within the NES framework.

"Member experiences demonstrate that the current legislative framework—particularly the two-day compassionate leave entitlement—is insufficient to protect parents during acute grief and the early adjustment period."
— TCF South Australia (Appendix A)

2.4 The Necessity

Two days of leave is widely recognised as insufficient for any parent to manage:

- **Immediate Obligations:** Organising funeral arrangements and addressing legal and administrative requirements, which can take several days according to national bereavement evidence.
- **Family Needs:** Supporting surviving siblings and managing the immediate emotional shock within the family unit.
- **Workplace Safety:** Ensuring a parent is not forced back into a work environment—particularly in high-risk or safety-critical roles e.g., healthcare, transport—while in a state of acute shock.

"Parents frequently describe returning during acute shock, resulting in cognitive impairment, emotional dysregulation, safety concerns, and further psychological distress."

— TCF South Australia (Appendix A)



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3.0 Medium-Term Reform

3.1 Goal: Institutional Protection

The goal of medium-term reform is to mitigate systemic barriers faced by bereaved parents and formalise an evidence-based national framework for workplace protection.

3.2 Addressing the "Carer's Penalty"

TCFA identifies a significant disadvantage for parents who are bereaved after their child dies from a long-term illness.

Parents often exhaust all available sick and carer's leave entitlements prior to their child's death (See Appendix A). This creates a "leave cliff," where parents have no leave entitlements remaining at the time of bereavement when they are most needed.

Policy Reform: Legislative changes are required to prevent this compounding financial and emotional disadvantage for long-term carers of children prior to their death.

"There was no understanding from my workplace. I had to take a month off, all on my annual leave. When it ran out, I went back, unable to concentrate, tearful, and completely overwhelmed. We lost our son at age 12 - and our community wanted to help. My workplace left me alone in my grief."
— Parent, TCF South Australia

3.3 The Right to Reassignment

Following the precedent set in *Pringle v State of Queensland (Queensland Health)*^[5], TCFA proposes a statutory right for bereaved parents to request a temporary or permanent reassignment where their current role presents a psychologically unsafe environment.

"I loved my job, but I couldn't face a room full of people right away. If I had been allowed to work in the back office for a month while I found my feet, I wouldn't have been forced to resign."
— Parent, TCF South Australia

This right would apply where an employee's current work environment has an association with their child's illness or death that the employee finds psychologically distressing.



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Employers would be required to reasonably accommodate these requests as part of their existing duty of care to provide a psychologically safe workplace^[6] at the National Minimum Wage, reducing the risk of secondary psychological injury.

3.4 Coronial and Investigative Leave

TCFA calls for protected leave entitlements for parents to participate in state-mandated processes.

Parents should not be forced to use annual leave or face loss of income when required to attend coronial inquests or other investigative processes related to their child's death.

Attendance at coronial proceedings is often mandatory and may extend over prolonged periods. Requiring employees to exhaust annual leave in such circumstances undermines both procedural fairness and psychological recovery.

3.5 Funding for Research

TCFA, through TCF Queensland, maintains an active research collaboration with the University of Queensland (UQ) to investigate best-practice workplace responses to child bereavement and inform future legislative and regulatory reform.

UQ provided information on research findings that indicate that the death of a child results in clinical levels of psychological distress and functional impairment.

41% of bereaved parents in the study reported thoughts of self-harm or that they would be "better off dead".

11% of these parents reported experiencing such thoughts every single day.

39% of participants bereaved for at least 12 months scored in the range suggestive of probable Prolonged Grief Disorder.

— **UQ Research (Appendix B)**

Further funding is required for research into improving support for bereaved parents in their recovery and eventual return to work – including the potential use of emerging technologies like AI and Virtual Reality.

"Data from Australia's largest bereavement study co-led by UQ found the death of a child... was associated with a greater likelihood of clinical and severe levels of grief, depression and anxiety. Living with these reactions was, in turn, associated with self-reported impairments in the ability to function across work, home management, social leisure, private leisure and relationships."

— **Lobb, E. A, Maccallum, F, and Ivynian, S. (2023)^[9]**



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4.0 Long-Term Reform

4.1 Goal: Integrated National Response

The objective of long-term reform is to establish an integrated national response to child bereavement that is evidence-based and aligns Australia's workplace laws with modern social security standards and recognises child bereavement as both a public health and workforce participation issue.

4.2 Parental Bereavement Leave

Similar to the Australian Government's Paid Parental Leave (PPL) scheme^[7], TCFA proposes government-funded **12-week Parental Bereavement Leave** at the National Minimum Wage, providing a vital 'circuit-breaker' for stabilisation and recovery before a sustainable return to work.

TCFA recognises that standard leave mandates may not be feasible for all sectors, and the development of targeted Commonwealth income support will help ensure equity for bereaved parents who are sole traders or small business owners and lack employer-funded leave entitlements, ensuring the financial responsibility does not fall solely on employers.

"We were grieving our child and checking the mailbox for 'final notice' bills at the same time. A 12-week leave period would have been the circuit-breaker we needed to survive the shock without losing our house."
— **Parent, TCF Victoria**

4.3 A Centralised Bereavement Support Portal

To reduce the administrative burden on grieving families, TCFA proposes a national, centralised online bereavement support service modelled on the "My Aged Care" service^[8] delivery model.

The portal would provide a central location for resources to assist with bereavement – such as financial, legal, workplace, and emotional support services.

"The administrative burden of death—bank accounts, phone plans, social media, government departments—is a full-time job at a time when you are least capable of doing it. Having one place to go or one person in the workplace who actually understands the process would have saved my sanity."
— **Parent, TCF South Australia**



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4.4 Corporate Grief Officers

Child bereavement reform is not limited to leave entitlements. It requires cultural capability, trauma literacy, and structured systems that prevent harm rather than relying on goodwill.

TCF members report instances of re-traumatisation due to internal communication failures during recruitment, training, and assessment processes (see Appendix A). TCFA propose that large organisations be required to designate trained Grief Officers within their Human Resources or wellbeing structures.

These officers would support employees, advise management, and coordinate internal workplace responses to bereavement to prevent secondary psychological injury, including responsibility for

- clear internal communication protocols (within privacy boundaries)
- assessing environmental triggers during return-to-work planning

4.5 Trauma-Informed Leadership Training

Workplace outcomes are heavily influenced by managerial awareness and emotional intelligence. TCFA propose trauma-informed training for managers and HR personnel that should focus on:

- Recognising grief as cognitive and psychological injury
- Appropriate communication during acute bereavement
- Avoiding premature performance management escalation
- Supporting gradual and sustainable return-to-work pathways

Without training, managers may unintentionally compound trauma by pressuring early return or misclassifying trauma responses as performance deficits.

Training would promote consistency, reduce organisational risk, and create psychologically safer workplaces.



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5.0 Conclusion

The death of a child is a profound human tragedy with measurable social, economic, and workplace consequences. When employment frameworks fail to recognise this reality, the resulting social and economic costs are borne by parents, employers, and the broader community.

Legislative reform, combined with workplace education, would:

- Reduce forced workforce exit
- Improve retention and productivity
- Protect families from financial crisis
- Support safer and more sustainable return-to-work outcomes

This reform agenda is grounded in lived experience and aligns with workforce participation, equity, and mental health objectives.

Australia has already demonstrated leadership in recognising infant loss through recent *Fair Work Act* reforms^[1]. The next step is to ensure these protections are applied equitably to all bereaved parents, regardless of the age of their child. Grief from the death of a child does not diminish as the child grows older, and neither should the support available to those left behind.



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References

[1] Fair Work Amendment (Baby Priya's Law) Act 2025 (Cth)

This recent reform established the precedent for recognising the devastating consequences of infant loss within the national safety net.

Link: <https://www.legislation.gov.au/Details/C2025A00056>

[2] Fair Work Act 2009 (Cth), National Employment Standards (NES), Division 12 – Compassionate Leave

The current legislative framework that limits compassionate leave to two days for the death of a child.

Link: <https://www.fairwork.gov.au/leave/compassionate-and-bereavement-leave>

[3] Fair Work Act 2009 (Cth) (Proposed Amendment to Section 104-106) The specific legislative target for the TCFA proposal to increase the statutory floor for child bereavement leave from two days to ten days. This amendment seeks to modernize the National Employment Standards (NES) to reflect contemporary clinical evidence regarding acute grief

Link: <https://www.legislation.gov.au/Details/C2009A00028>

[4] Fair Work Amendment (Paid Family and Domestic Violence Leave) Act 2022 (Cth) The existing legislative precedent that provides a 10-day statutory floor for employees facing peak-level personal and social crises.

Link: <https://www.legislation.gov.au/Details/C2022A00050>

[5] Pringle v State of Queensland (Queensland Health) [2024] QIRC This case involving Hannah Pringle serves as the evidentiary basis for the proposed "Right to Reassignment".

Link: <https://www.sclqld.org.au/caselaw/148231>

[6] Work Health and Safety Amendment (Managing Psychosocial Risks) Regulations 2022 (Cth) These regulations established the specific legal requirement for PCBUs to identify and manage psychosocial hazards, treating psychological health with the same regulatory rigor as physical safety.

Link: <https://www.legislation.gov.au/Details/F2022L00710>

[7] Services Australia: Parental Leave Pay The existing Commonwealth funding model used as the basis for the proposed 12-week Parental Bereavement Leave.

Link: <https://www.servicesaustralia.gov.au/parental-leave-pay>

[8] Australian Government: My Aged Care Service Delivery Model Model for a centralised online platform.

Link: <https://www.myagedcare.gov.au/>

[9] Lobb, E. A., Maccallum, F., & Ivynian, S. (2023) Bereavement during COVID-19 Study This study, co-led by the **University of Queensland**, serves as the primary clinical evidence base for this submission. It documents the **41% rate of self-harm** and significant functional impairment among bereaved parents in Australia, justifying the need for extended leave.

Link: https://www.uts.edu.au/globalassets/sites/default/files/2024-11/Bereavement_during_COVID19_MRFF_FINAL_REPORT_LobbMaccallumIvynian_2023.pdf



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Appendix A – Lived Experience of TCF Members

Privacy and Ethics Statement

The Compassionate Friends respects the confidentiality of its members information. The case studies provided in this Appendix are de-identified accounts based on the lived experiences of bereaved parents. Names and identifying details have been omitted or altered to protect the confidentiality of the families involved, while maintaining the factual integrity of their workplace experiences.

A.1 Case Studies from TCF South Australia

TCF South Australia collected firsthand reports and case studies of employment impacts after the death of a child from members over multiple years of peer-support engagement across metropolitan and regional South Australia. Consistent themes emerged that demonstrate systemic employment risks post-bereavement:

1. Employment Insecurity Following Leave Exhaustion

Termination, contract loss, or role restructuring frequently occurs following exhaustion of minimal compassionate leave entitlements.

Particularly pronounced among casual, contract, and public sector workers, where employment protections are limited.

2. Manager-Dependent Support

Workplace outcomes vary significantly depending on individual leadership rather than structured protections.

Support arrangements are often withdrawn following leadership change, indicating systemic vulnerability where protections rely on discretion rather than policy.

Case Study

A parent received understanding and flexibility from her immediate manager following the death of her child.

However, after a change in organisational leadership, the newly appointed CEO adopted a markedly different approach.

Previously agreed flexibility was reduced, expectations shifted abruptly, and pressure to resume full duties increased despite ongoing grief-related impacts.



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3. Premature Workforce Exit

Members report resignation or retirement from the workforce during acute grief.

Irreversible employment decisions frequently occur within the first weeks of bereavement, in the absence of protected adjustment time.

While retirement or resignation may appear voluntary, in practice it may represent a crisis response in the absence of structured leave or support mechanisms. Premature workforce exit has long-term consequences, including reduced superannuation accumulation and increased financial vulnerability.

Case Study

A parent in permanent employment immediately retired at time of bereavement

“I retired on the day my child died. While recorded as a voluntary retirement, I knew I just couldn’t cope going back to work. I was broken.”

Her retirement occurred in the absence of structured bereavement leave or protected adjustment time. There was no mechanism to pause employment decisions during acute trauma.

Policy Implication:

Extended, protected bereavement leave would function as a circuit breaker — preventing irreversible workforce exit made during psychological shock.

4. Pressure to Return to Work

Members report both explicit and implicit pressure to return to work within days of their child’s death.

- Return-to-work framed as “resilience” or “moving forward.”
- Concerns raised about business continuity or operational impact.
- Fear of job insecurity if leave is extended.

Parents frequently describe returning during acute shock, resulting in cognitive impairment, emotional dysregulation, safety concerns, and further psychological distress

5. Performance Escalation During Trauma

Cognitive impairment and emotional dysregulation during acute grief can be misinterpreted as capability concerns. In the absence of trauma-informed training, performance management processes may be initiated.



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Case Study

A professional in oncology clinical trials suffered cognitive impairment during acute grief and was performance managed.

“I took a new job three months after losing my daughter. I struggled to focus and remember, so I created cheat sheets to keep up. When I raised concerns about the lack of grief support in our workplace culture, I was administratively managed out of the role.”

Normal trauma responses — impaired concentration, memory disruption, emotional dysregulation — were treated as performance concerns rather than psychological injury.

Policy Implication:

Without trauma-informed leadership training and structured protections, grief responses can escalate into performance management and forced resignation.

6. Leave Depletion Prior to Death (“Carer’s Penalty”)

Parents caring for children with long-term or terminal illness exhaust leave entitlements prior to bereavement.

High incidence among families managing oncology, complex disability, and chronic illness care.

Case Study

A parent of a child with terminal illness has exhausted all leave prior to the death of the child.

“After months of hospital care for my child, I had exhausted all annual leave, personal leave, and long service leave before my child passed away. I was forced to work through the toughest period of my life in order to avoid financial ruin.”

At the time of bereavement, no paid entitlements remained. Grief was compounded by immediate financial insecurity.

Policy Implication:

Current leave structures unintentionally penalise parents of medically complex children. Reform must address cumulative leave depletion prior to death.



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Conclusions

These member experiences demonstrate that the current legislative framework — particularly the two-day compassionate leave entitlement — is insufficient to protect parents during acute grief and the early adjustment period. It exposes bereaved parents to preventable financial instability, employment insecurity, and premature workforce exit.

Consequences include:

- Reduced superannuation accumulation
- Long-term economic vulnerability
- Increased mental health risk
- Organisational productivity loss
- Escalated system-level social and health costs

Without structural reform, parents are forced to navigate profound grief and economic survival simultaneously. The current framework unintentionally transfers systemic risk onto grieving families.



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Appendix B – Academic Research: The University of Queensland (UQ) and TCFQ

Our research partners at the University of Queensland provided us with the following compelling data and findings:

Each year in Australia, approximately 2,500 children and young people (aged 0–24) die, along with 8,500 adults aged 25–50^{1,2} leaving an estimated 20,000 parents newly bereaved by the death of their child. Many of these deaths are sudden or traumatic, resulting from suicide, road traffic incidents, accidental poisonings, and aggressive illnesses,³ placing all the family members at significantly elevated risk of developing mental health conditions and early mortality.

Bereavement outcomes in Australia during the COVID-19 Pandemic

Data from Australia's largest bereavement study co-led by UQ⁴ found the death of a child (and death of a partner/spouse) was associated with a greater likelihood of clinical and severe levels of grief, depression and anxiety. Living with these reactions was, in turn, associated with self-reported impairments in the ability to function across work, home management, social leisure, private leisure and relationships. It was also associated with worsening financial situation, a greater likelihood of being unemployed and looking for work, or out of the workforce for reasons other than retirement, and social isolation and loneliness.^{5,6} 41% (58) of bereaved parents within this study endorsed “thoughts you would be better off dead or of hurting yourself in some way” at least some days during the past 2 weeks. Concerningly, 11% (16) reported experiencing such thoughts every day. To an open-ended response about unmet needs - participants (across the whole sample) described needs for practical support after the death, carer support before and after the death, greater workplace support, and information and advice about grief.⁷

UQ study into Workplace Support for Bereaved Parents ⁸

Initial qualitative research has been conducted by researchers in the School of Psychology at the University of Queensland, enquiring into **Workplace Supports for Bereaved Parents**. This study interviewed 16 working adults who had experienced the loss of a child at any time in their life, and who were working during their bereavement. The study specifically explored:

1. Experiences of the types of workplace support organisations typically provide to bereaved parents;
2. Whether support provided by organisations aligns with what is known regarding grief and coping models; and
3. What organisations can do to better support employees cope with their bereavement in both remain-at-work and return-to-work contexts.



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Findings from this study suggest that bereaved parents find immediate, loss-oriented supports—especially well managed leave and practical help—as consistently helpful. In contrast, ad hoc or premature return-to-work processes were often reported to be harmful. Because grief oscillates and needs fluctuate week to week, increasing compassionate leave and enabling flexible, staged return practices may be a low-cost, high-impact way to prevent avoidable harm and keep people connected to work over the long term. Our findings suggest the following workplace improvements could mitigate some of the negative implications for bereaved parents returning to work after the death of a child:

- 1 Increase paid compassionate leave after the death of a child and allow both an initial block and intermittent use over the first 6–12 months (to match grief oscillation and key milestones/anniversaries).
- 2 Implement flexible RTW pathways: options for gradual hours, temporary duty changes, remote/hybrid days, and redeployment away from customer facing or triggering roles for a defined period.
- 3 Fund grief informed manager and co-worker training (how to acknowledge grief without harm; what to avoid—e.g., comparisons that minimise child loss; how to manage work adjustments).
- 4 Ensure resourcing instrumental supports (e.g., small discretionary funds or leave coordinators) to reduce the early cognitive burden on families.
- 5 Commission evaluation of the workplace interventions noted above.

Drafting the academic publication for this important project is currently underway, but more needs to be done to understand the nature and implications of parental grief in workplaces. While this study is a first step, the development and testing of workplace interventions is a critical next phase for this currently unfunded and underexplored area of workplace need.

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