




**HEALTH AND
WELLBEING
FOR WOMEN
ACTION PLAN
2020-23**



The Tasmanian Government acknowledges the Aboriginal Custodians of Tasmania and recognises their continuing connection to land, waters and culture. We pay our respects to Elders past and present.

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Minister's message

The *Health and Wellbeing for Women Action Plan 2020-23* is the second in a series of action plans under the *Tasmanian Women's Strategy 2018-21*. It has been informed by submissions and survey responses made to the Tasmanian Government in the development of the Strategy, as well as research findings and statistical data on women's health and wellbeing.



Although Tasmania is currently dealing with an unprecedented health emergency as a result of the Coronavirus (COVID-19) pandemic, addressing gender inequality and improving the overall health and wellbeing of Tasmanian women will remain a priority of the Government now and post-pandemic. Notwithstanding that women in Tasmania generally enjoy a relatively high standard of health and have a life expectancy of 83 years,¹ there is still more work to be done to recognise and respond to health outcomes for different women and girls within our population.

In terms of physical health, the most common diseases experienced by women are cancers, musculoskeletal conditions and cardiovascular disease. These diseases make up 44 per cent of the burden of diseases in Australian females.² Smoking in pregnancy has also been identified as a significant issue for women and their unborn children, and tobacco use is a major cause of some cancers and cardiovascular disease. In 2016, around 15 per cent of Tasmanian women over 18 years were current smokers, compared with 16.5 per cent of males.³ Other risk factors for women's health outcomes include poor diet, physical inactivity,

overweight and obesity, and family violence. Additionally, mental and substance use disorders represent the third most significant burden of disease for women nationally,⁴ with one in five women in Australia experiencing depression and one in three women experiencing anxiety in their lifetime.⁵

The Tasmanian Government is committed to reducing the barriers to optimising women's health and wellbeing, and building the capabilities of women and girls to manage their own health. Through the *Levelling the Playing Field* grants program, we have committed \$10 million over two years to improve sports facilities for women and girls. In 2018-19, 21 projects received funding of between \$15,000 and \$1 million, and a further 14 projects were funded in 2019-20 throughout the State. Grants were provided to support building new or upgrading existing facilities to support female participation, including change rooms, lockers, toilets, shower facilities and other amenities.

Consultations conducted by the Tasmanian Government on the *Tasmanian Women's Strategy 2018-21* identified the need to address a range of issues for women,

including improving women's maternal, sexual and reproductive health; facilitating healthy lifestyle choices from an early age; preventing chronic conditions; meeting the mental health support needs of women and girls; and addressing adverse factors that impact on women's health such as poverty, sexism, racism, violence against women and girls, homelessness, cost of living impacts, and other related factors. The health and wellbeing of a proportion of Tasmanian women and girls is compromised by the cumulative impacts of these related factors.

This Action Plan recognises the importance of health education in the early years through the school curriculum, as well as strategies to provide individual and community information and support to women to manage their own health. It also recognises the importance of adopting a life course approach to health and wellbeing for women and girls. Through targeted health policy, planning, education and service delivery focusing on the particular needs and circumstances of priority groups of women and girls, there is substantial scope to improve health equity among all women and girls and across the whole population.



There are already many programs and initiatives underway to improve the health and wellbeing of all Tasmanians. For example, the Department of Health is the lead agency for the *Healthy Tasmania Five Year Strategic Plan*, which was released in 2016. In August 2019, the Department convened a state-wide community forum to celebrate achievements and inform future directions for Healthy Tasmania. \$3 million has already been distributed in Healthy Tasmania grants to Tasmanian communities, and the Premier's Health and Wellbeing Advisory Council supports Healthy Tasmania by stimulating cross-sector action on the determinants of physical activity, healthy eating and tobacco control.

In August 2019 the former Premier, the Hon Will Hodgman MP, signed a Tasmania Statement that acknowledges the 2,000 generations of Aboriginal culture and the profound significance of culture to health and wellbeing. The Tasmanian Government is working to improve the health of Tasmanian Aboriginal women, including by making mainstream health services culturally respectful. A cross-sector working group is developing an *Action Plan for Improving Aboriginal Cultural Respect in*

Tasmania's Health System and the Plan is close to being finalised. This is the first time there has been a coordinated, state-wide focus on improving Aboriginal cultural respect across the Tasmanian health system. The project has had strong support from across the health sector, including Aboriginal community-controlled health services. The draft plan was strongly informed by the *Aboriginal Cultural Respect in Tasmania's Health Services – Community Consultation Report* (Department of Health, 2018) and the *Cultural Respect Framework for Aboriginal and Torres Strait Islander Health 2016-2026* (Australian Health Ministers' Advisory Council, 2016). Tasmania is also a signatory to the *National Partnership Agreement on Closing the Gap 2019-2029* and is committed to closing the gap in life outcomes between Aboriginal and non-Indigenous Tasmanians.

This Action Plan is designed to build on existing programs and initiatives, and to align with the *National Women's Health Strategy 2020-2030* and other health related policies and strategies, which are referenced in the Plan. There is a lot of work to do to achieve optimal levels of health and wellbeing for women and girls across the life course, and across the diverse groups within

'This Action Plan is designed to build on existing programs and initiatives, and to align with the National Women's Health Strategy 2020-2030'

our community. Achieving positive health and wellbeing outcomes for women requires a consistent effort from individuals, communities and governments. As this Action Plan was developed prior to COVID-19, it is likely that some of the timeframes for actions contained in this Plan may change. However, all actions within this Plan will continue to be progressed over the next three years to help improve health and wellbeing outcomes for women and girls in Tasmania.

The Hon Sarah Courtney MP
Minister for Women
Minister for Health

Introduction

The *Health and Wellbeing for Women Action Plan 2020-23* (the Action Plan) outlines Tasmania’s approach to improving health and wellbeing outcomes for women and girls.

The Action Plan recognises that there are a range of health issues experienced by women at different stages of life, influenced by social, economic, environmental, biomedical and behavioural factors. Identifying the most appropriate intervention is

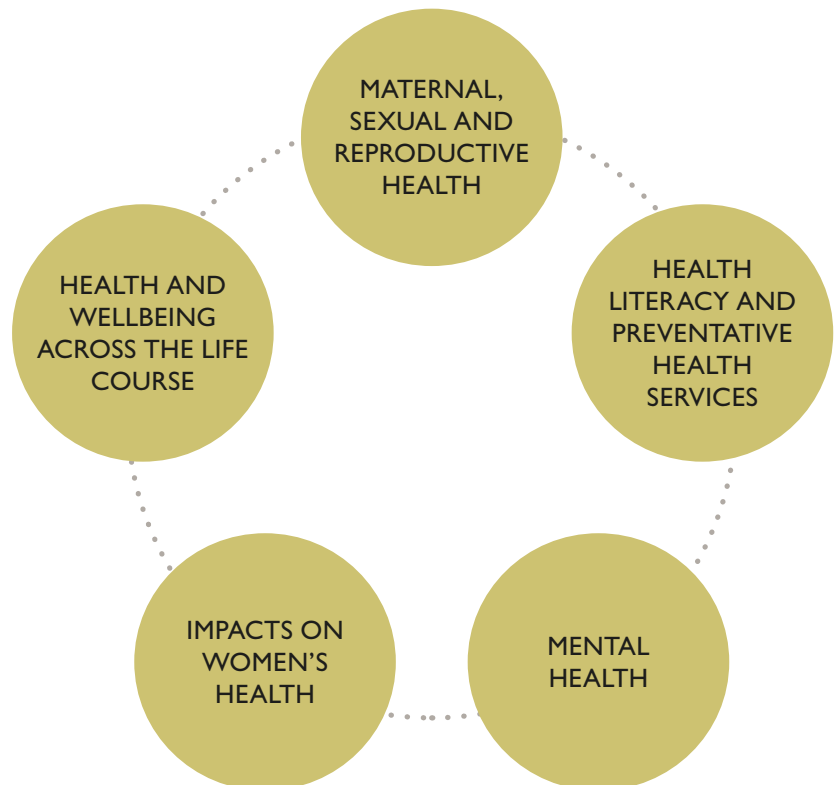
important, as well as responding to the different needs of population groups and tailoring services and programs to reduce inequities in health and wellbeing outcomes.

The Action Plan aims to improve the overall health and wellbeing of all

women and girls in Tasmania through its focus on five strategic priorities. While each action listed in the Action Plan has a lead agency (or agencies), many cross-agency partnerships are being undertaken across these priority areas.

Strategic Priorities

1. Improving women’s maternal, sexual and reproductive health.
2. Improving health literacy and targeting preventive health services to address women’s health needs.
3. Enhancing women’s mental health through prevention, early intervention and responsive service delivery.
4. Addressing impacts on women’s health, such as violence against women and girls, homelessness and other related factors.
5. Facilitating health and wellbeing across the life course.



I. Improving women's maternal, sexual and reproductive health

Maternal, sexual and reproductive health are important aspects of women's overall health. Despite the high standard of health in Tasmania, women continue to face barriers in health care access, particularly in relation to reproductive and sexual health.

Ensuring that all women can access services and exercise choice and control in relation to sexual and reproductive health remains a challenge. According to consultation conducted by the Department of Communities Tasmania in the development of the *Tasmanian Women's Strategy 2018-21*, there are a number of women in Tasmania who are unsure of 'where to find sexual health information and services'.⁶ Tasmanian women also indicated a need to be supported and informed on conditions affecting their general health.⁷

Pregnancy and maternal health

Positive perinatal health and wellbeing is important for both the woman and her child, as a newborn baby's health is a key determinant of subsequent health and wellbeing.⁸ Key indicators of a newborn baby's health include birthweight and pre-term birth. Low birth weight is associated with neonatal complications and can contribute to



chronic conditions later in life. During 2017, 8.3 per cent of babies born in Tasmania weighed less than 2.5kg compared to 7.2 per cent nationally.⁹

In 2018, Tasmania had a Total Fertility Rate (TFR) of 1.77 births per woman, which has declined from the TFR of 2.24 birth per woman in 2008.¹⁰ This declining rate is reflective of the national trend (2.02 births per woman in 2008 to 1.74 in 2018).¹¹ Despite the decline in TFR, Tasmania has the third highest fertility rate of any Australian state or territory.¹² As such, maternal health care, including pregnancy, childbirth, post-natal health, breastfeeding, and specifically perinatal and infant mental health, are important issues for many Tasmanian women.

Smoking in pregnancy is a significant causal factor in adverse health outcomes

for both pregnant women and their unborn children. Smoking by pregnant women in Tasmania has declined significantly over the last decade from 28 per cent in 2005 to 14.5 per cent in 2017¹³. However, in recent years the rate of decline has stagnated and continues to be alarmingly high for pregnant women under 20 years of age, at around 40 per cent. Pregnant women are identified as a priority population group in the *Tasmanian Tobacco Control Plan 2017-2021* and included in *No One left Behind: An action plan to achieve a smoke free Tasmania 2018-2021* – a plan to address smoking cessation in populations with high smoking rates. A focus of the plan is to increase referrals of pregnant women to cessation support. Both these plans align with the *Healthy Tasmania Five Year Strategic Plan* and this Action Plan.

Nationally, the *Australian National Breastfeeding Strategy: 2019 and Beyond* was approved by the Council of Australian Governments Health Council in March 2019. The Strategy provides a set of nationally consistent indicators for enabling baby-friendly health settings, along with universal and targeted breastfeeding education and support services.

In the *State of the State* address to Parliament on 3 March 2020, the Premier highlighted the importance of investing in the wellbeing of children and young Tasmanians. The Government is committed to delivering Tasmania's first ever comprehensive, long-term, whole of government Child and Youth Wellbeing Strategy, which will be further detailed in the 2020-21 State Budget.

The strategy will focus on the first 1,000 days of life, where there is very clear evidence that a good start from conception to age two is vitally important to a child's development.

The Government remains committed to ensuring Tasmanian women are able to access the full range of women's health services, and have readily available access to information on pregnancy options and services, including surgical and medical terminations.

Sexually transmitted infections

Sexually transmissible infections (STIs) are often asymptomatic in women, but the health impacts can be significant. Chlamydia is the most common STI in Australia and is used as a proxy indicator for risky sexual behaviour. Between 2012 and 2016, chlamydia accounted for over 95 per cent of all STIs notified in Tasmania.¹⁴ This is down

slightly from 97 per cent in the period from 2007-2011. In Tasmania, the chlamydia trend peaked in 2010 with over 2,000 diagnoses, compared with 1,582 in 2017.¹⁵ Females had significantly higher notification rates than males due to their greater likelihood of being screened by a primary care provider.¹⁶ Testing for STIs is covered by Medicare and national statistics indicate that women utilise this service twice as much as men.¹⁷

Specific groups of women

Specific issues in relation to maternal, sexual and reproductive health exist for specific cohorts of women, including young women, Aboriginal women, women living in rural and remote areas, women with disability, LGBTIQ women, and women from culturally and linguistically diverse backgrounds. The Action Plan includes specific actions to better meet the sexual and reproductive health issues of specific groups of women and girls.

Actions

Action 1.1

Increase sexual and reproductive health literacy amongst young women, and promote access to resources for students and parents to learn more about sexual and reproductive health. (Department of Health/Department of Education)

Action 1.2

Improve access to a full, safe and effective range of reproductive and contraceptive information and options. (Department of Health)

Action 1.3

Promote access to resources for students and parents to learn more about sexual and reproductive health. (Department of Education)

Action 1.4

Provide culturally accessible sexual and reproductive health information to increase the capacity of women from refugee and migrant communities to make informed choices about sexual and reproductive health. (Department of Communities Tasmania)

Action 1.5

Continue work to reduce smoking rates for women and girls, particularly during pregnancy. (Department of Health)

Action 1.6

Form a maternal health collaboration across relevant services. (Department of Health)

Action 1.7

Support State Service employees to combine the demands of work and parental responsibilities, by providing reasonable time and access to suitable facilities in the workplace for the purpose of expressing milk, breastfeeding, or any other activity necessary for breastfeeding and expressing in the workplace. (Department of Premier and Cabinet)

2. Improving health literacy and targeting preventive health services to address women's health needs

The Tasmanian population currently experiences poor health outcomes compared to other states and territories, including high rates of chronic disease and health risk factors like smoking, obesity, poor nutrition and low physical activity levels.¹⁸ Improving health literacy and targeting preventive health services are important strategies to address these challenges, which will help to improve health outcomes for all Tasmanians, including women and girls.

Prevention is an important element in the continuum of health care. Interventions such as vaccination and screening can prevent people from getting sick in the first place, save lives and reduce illness and disability, which has significant health and wellbeing benefits for individuals and the population.¹⁹ Likewise, improving health literacy is an important strategy to improve the health of Tasmania's population. Health literacy is the knowledge and skills needed to source, understand and use health information to make informed decisions about health issues.²⁰ In 2016, an Australian

Bureau of Statistics survey found that 63 per cent of Tasmanians aged 15-74 years old do not have adequate health literacy to meet the complex demands of everyday life.²¹

The leading causes of death for Tasmanian females in 2016 were cardiovascular disease (CVD) including ischaemic (coronary artery) heart disease, and dementia and Alzheimer's disease, each causing almost 10 per cent (219) of all female deaths that year.²² Nationally, the death rate from dementia and Alzheimer's disease is increasing, while the ischaemic heart disease death rate is decreasing. Dementia and Alzheimer's disease are now the leading cause of death for women in Australia overall.²³

Cardiovascular Disease

CVD, including ischaemic heart disease, is the leading cause of death and disease burden in Australia.²⁴ The number of people living with cardiovascular disease is increasing due to factors including population ageing and improved treatments that have resulted in people living longer with CVD.

In 2017-18, an estimated 510,000 Australian women had CVD, 206,000 women had coronary heart disease and 37,000 women had heart failure.²⁵ Many chronic conditions, including CVD, share common risk factors that are largely preventable, such as tobacco use, risky alcohol consumption, overweight and obesity, physical inactivity, and high blood pressure. Reducing exposure to these and other risk factors can help to reduce the risk of developing CVD and experiencing CVD events, such as heart attack and stroke.

Dementia

Consultation by the Tasmanian Women's Council has identified dementia as a key issue for women. The most common form of dementia is Alzheimer's disease, which accounts for up to 70 per cent of all dementias.²⁶ In 2016, Tasmanian women were twice as likely as men to die from dementia and Alzheimer's disease.²⁷ The Dementia Care Degree Program offered by the University of Tasmania is Australia's first degree specifically focused on dementia, and focuses on specialist knowledge of dementia and dementia care to enable the delivery of best practice dementia care.²⁸ The Menzies Institute for Medical Research also has a number of research projects underway that address aetiology and management issues.²⁹

Cancers

In 2015, breast cancer was the second most commonly diagnosed cancer in Australia and the most commonly diagnosed cancer in females. According to the latest report from the Australian Institute of Health and Welfare, breast cancer is projected to overtake prostate cancer to become the most commonly diagnosed cancer in Australia in 2019.³⁰ BreastScreen Tasmania is part of BreastScreen Australia – a national breast screening program that aims to continue to reduce deaths from breast cancer through early detection of the disease. Tasmania currently has the highest rate of participation in breast cancer screening of any state or territory in Australia, with 42.7 per cent of women aged 40 and above undertaking regular breast screening.



In 2018, 34,383 Tasmanian women were screened for cancer through the State's clinic and mobile sites.

BreastScreen Tasmania has also been awarded the highest level of accreditation, Accredited with Commendation, by the national accreditation body for its outstanding performance against all National Accreditation Standards. This is the first time a state-wide breast screen service has achieved this top level accreditation in Australia. BreastScreen Tasmania's accreditation status is a badge of excellence for health service provision for the State, and ensures Tasmanian women can feel confident they are receiving the highest quality service when they attend for their regular breast screen.

Colorectal cancer was the third most commonly diagnosed cancer in Australia in 2015. It is estimated that it will remain the third most commonly diagnosed cancer in 2019. In 2015, 15,604 new cases of bowel cancer were diagnosed in Australia. The risk of being diagnosed by age 85 is 1 in 11 for men and 1 in 16

for women. In 2016, there were 5,375 deaths caused by bowel cancer in Australia. This represents the second highest number of cancer deaths in Australia.³¹ In 2018, only 42.9 per cent of Tasmanian females aged 50-74 participated in the free national bowel cancer screening program.³² The Department of Health will continue to implement key actions to promote the prevention and screening of cancers, by raising awareness of cancer prevention and supporting general practitioners to refer women to cancer screening services.

Immunisation

Immunisation is an important public health measure providing protection against vaccine-preventable diseases for the individual, and important benefits for the long-term health of the community. The Tasmanian Government participates in the National Immunisation Program and funds a range of State-based immunisation programs. As evidenced

by the release of the *Tasmanian Immunisation Strategy 2019-24*, the Tasmanian Government is committed to increasing immunisation coverage for all Tasmanians across their lifespan and reducing the incidence of vaccine-preventable disease.

While Tasmania has strong immunisation performance in some areas, such as having the highest coverage rates for five-year olds in Australia in 2018,³³ there are challenges in other areas. In 2017, Human Papillomavirus (HPV) immunisation rates for Tasmanian 15 year old males and females were the lowest in Australia, with 75 per cent of 15 year old females being fully vaccinated for HPV.³⁴ Achieving an 80 per cent rate of HPV coverage in females and males aged 12 years is a priority in the *Tasmanian Immunisation Strategy 2019-24*. Another priority area of the Strategy is to increase vaccinations for women during pregnancy, to protect both themselves and their newborn child from influenza and diphtheria-tetanus-pertussis.



Prolapse, incontinence and pelvic pain

Evidence and best practice indicate that, when clinically appropriate, non-surgical services such as physiotherapy should be the first treatment option for women with prolapse, incontinence or pelvic pain. The Tasmanian Health Service will continue to provide physiotherapy treatment for women suffering from these conditions.

Actions

Action 2.1

Continue to implement key actions relating to prevention and screening of cancers, including promoting and increasing access to cancer screening programs, increasing cancer prevention awareness, and supporting general practitioners by facilitating referral pathways for eligible women. (Department of Health)

Action 2.2

Continue to implement the *Tasmanian Immunisation Strategy 2019-24* to facilitate and improve immunisation coverage across the life course, including improving the Human Papillomavirus immunisation rate. (Department of Health)

Action 2.3

Continue to implement key actions to address the prevention and management of chronic conditions, such as cardiovascular disease and dementia, under the *Healthy Tasmania Five Year Strategic Plan*. (Department of Health)

3. Enhancing women's mental health through prevention, early intervention and responsive service delivery

The 2016 Tasmanian Population Health Survey found that 13.7 per cent of Tasmanians reported high/very high levels of psychological distress³⁵. Women are more likely to experience high levels of psychological distress than men, with 16 per cent of women and 11.4 per cent of men self-reporting.



Nationally, mental and substance use disorders represent the third most significant burden of disease for women after cancer and cardiovascular disease,³⁶ noting there is a strong link between mental illness and substance abuse.³⁷ Although women are less likely than men to rely on substances, 48.5 per cent of females with a substance abuse problem in Australia noted that they also suffered from a mental health disorder.³⁸

Nationally, up to 15 per cent of women are affected by eating disorders, which are complex neuropsychiatric disorders that have amongst the highest fatality rates of any psychological disorder.³⁹ Eating disorders have significant physical, psychological and social impacts on the person experiencing the disorder, and may have broader impacts on the person's family, friends and community. The Australian Government is working on the development of a residential eating disorder treatment facility in Tasmania, which will provide specialist

care to people experiencing eating disorders, and help advance the way eating disorders are diagnosed and treated through training, education and advocacy.

Beyond health, there are both social and economic costs associated with mental health disorders. Those suffering from mental health issues may also suffer from social isolation and unemployment, leading to homelessness and poverty. The mental health cost to the Australian economy is estimated to be around \$34.5 billion.⁴⁰

The Tasmanian Government has made it a priority to improve mental health services for women and girls. In 2018, the Mental Health Integration Taskforce undertook to identify best practice ways of providing a system of integrated mental health care, so people can get more holistic support at the right place and at the right time. The recommendations and

issues raised by the Taskforce are now informing a new approach to improve the integration of mental health supports and services, including in primary and community-based settings. A Tasmanian Regional Planning Steering Committee has also been established to work on the development of a joint regional mental health and suicide prevention plan for Tasmania. This work aligns with the *Fifth National Mental Health and Suicide Prevention Plan*, which was released by the Council of Australian Governments Health Council in 2017, and commits all governments to work together to build an integrated mental health system.

The Mental Health Best-Practice Framework is under development as an action under the *Tasmanian Suicide Prevention Strategy 2016-2020*. The Tasmanian Government is committed to ensuring that the new Framework for the State Service responds to the mental health needs of female

employees. The development of the Framework will be informed by broad consultations across the Tasmanian State Service.

Over recent decades, there has also been a growing understanding of the risk of mental health problems occurring during pregnancy and in the postnatal period. Systematic reviews in high-income countries have shown that about 10 per cent of pregnant women and 13 per cent of women who have given birth experience some type of mental illness, most commonly depression or anxiety.⁴¹ The needs of this group, and of their children, differ significantly from those of the general population and require specific responses.

In the Southern region of Tasmania, the Perinatal team provides a specialist service for pregnant and postnatal women with a range of mental health problems and psychiatric disorders. The team also provides mother-infant therapy, including assessment of suitability for admission to the Mother Baby Unit at St Helen's Private Hospital. In the North and North West regions, the perinatal service is provided by a clinician in each region based within the Adult Community Mental Health Teams. The Tasmanian Government will review perinatal and infant mental health services as part of the Tasmanian Mental Health Reform Project.

Bullying can cause significant harm and have lasting effects on women and girls and their families. As recent tragedies in Australia have shown, serious bullying can result in tragic personal consequences for victims, such as long-term mental health impacts, self-harm and psychological damage. As technology becomes increasingly intertwined with almost every aspect of our lives, so too can the reach of those who may seek to do others harm. Our online lives now make bullying even more commonplace. Social media and other platforms mean bullies can now have access to their victims 24 hours a day, seven days a week. In 2019, the Tasmanian Government introduced legislation to amend the Criminal

Code to make serious cyber bullying a criminal offence.⁴² This complements a range of measures that are already being undertaken in our schools to understand and address bullying behaviour, support those who are experiencing bullying and promote positive school cultures.

Seeking help early can lead to improved outcomes and reducing discrimination, stigma and prejudice can encourage people to seek help. The Government will continue work to increase literacy in mental illness and suicide prevention across service providers and the entire community to encourage women to seek help early.

Actions

Action 3.1

Continue work to build a fully integrated public mental health system that meets the needs of all Tasmanians through implementation of actions in the Tasmanian Mental Health Integration Taskforce Report. (Department of Health)

Action 3.2

Work with Primary Health Tasmania on the development of a Tasmanian Plan for Mental Health and Suicide Prevention as part of the implementation of the *Fifth National Mental Health and Suicide Prevention Plan*. (Department of Health)

Action 3.3

Continue to develop the *Mental Health Best-Practice Framework* as an action under the *Tasmanian Suicide Prevention Strategy 2016-2020*, and ensure the Framework responds to the mental health needs of female employees. (Department of Health)

Action 3.4

Review Tasmanian perinatal and infant mental health services as part of the Tasmanian Mental Health Reform Project. (Department of Health)

Action 3.5

Continue to use the Tasmanian Suicide Register to understand female suicide in Tasmania. (Department of Health)

Action 3.6

Continue to promote the Tasmanian Communications Charter: a State based approach to mental health and suicide prevention, to increase literacy in mental health and suicide prevention. (Department of Health)

Action 3.7

Continue to work in partnership with the community sector to trial the Housing and Accommodation Support Initiative, to provide integrated housing and support services for people with mental ill-health in public housing and community at-risk tenancies; help people to avoid becoming homeless and sustain their tenancies; and assist people to transition to independent living in the community. (Department of Health)

Action 3.8

Implement early action plans as part of the *2018-2021 Department of Education Child and Student Wellbeing Strategy* Implementation. In 2020 the focus will be on Physical Wellbeing and the Environment. (Department of Education)

Action 3.9

Implement the *Combatting Bullying Initiative* (including actions on cyber bullying) to ensure that all schools are safe, inclusive and supportive. The Bullying Stops Here website, community partnerships and school grants are supported through the Initiative. (Department of Education)

Action 3.10

Implement *The Principal Wellbeing Action Plan 2019-2022*, which comprises 19 initiatives including co-designing a community education campaign to encourage respectful behaviours in school settings. (Department of Education/Department of Health)

Action 3.11

Promote a culture of respect for diversity and inclusive work practices across the Tasmanian State Service, enable workers access to flexible mental health support and ensure that the employee survey captures data around work health, safety and wellbeing. (Department of Premier and Cabinet)

4. Addressing impacts on women’s health, such as violence against women and girls, homelessness and other related factors

Violence

Feeling safe at home, at work, at a place of study and in the community is a basic human right. Violence against women is recognised as a serious and widespread problem in Australia, with enormous individual and community impacts and social costs. Women who experience intimate partner violence and/or sexual violence are more likely to report poorer mental health, physical function, and general health, as well as higher levels of bodily pain.

Intimate partner violence is the greatest health risk factor for women in their reproductive years. It contributes more to the burden of disease (the impact of illness, disability and premature death) of adult women in their reproductive age (18-44 years) than any other risk factor, including smoking, alcohol and obesity.⁴³ It contributes an estimated 5.1 per cent of the burden of disease in women aged 18-44 years.⁴⁴ Abuse and trauma across the life course may have a cumulative deleterious effect on health and wellbeing.

Safe Homes, Families, Communities: Tasmania’s action plan for family and sexual violence 2019-2022 (Safe Homes, Families, Communities) is the Tasmanian Government’s, coordinated, whole-of-government action plan to respond to family and sexual violence. Safe Homes, Families, Communities represents the next stage of the Tasmanian Government’s long-term commitment to preventing and responding to family violence and a new response to sexual violence.

Safe Homes, Families, Communities is investing \$26 million over three years for 40 actions to prevent and respond to family and sexual violence in Tasmania under three priority areas:

1. primary prevention and early intervention;
2. response and recovery; and
3. strengthening the service system.

Actions in Safe Homes, Families, Communities are aimed at driving changes in cultures, behaviours and power imbalances that lead to violence against women, as well providing specialised support to women and girls affected by family and sexual violence.

Primary prevention makes the prevention of violence everyone’s responsibility and asserts that we all have a role to play in changing the culture, structures and attitudes that drive family and sexual violence. Preventing violence from happening in the first place is the single most effective way to end violence against women.

Respectful Relationships education supports students to build healthy, respectful, safe, and equal relationships and address the attitudes and behaviours that lead to family violence. It is about enabling school communities to build respectful, safe and inclusive learning environments; equipping young people with lifelong skills to develop and maintain healthy and respectful relationships; and improving wellbeing and learning outcomes.

Under Safe Homes, Families, Communities, the Tasmanian Government continues to embed

Respectful Relationships education in all Tasmanian Government schools. The *Respectful Relationships Education Package* includes an extensive range of resources to support schools, communities and individuals to understand why family violence occurs and how to create a culture that promotes respectful relationships for everyone.

The Tasmanian Government is a member and partner with Our Watch, which is a key element to supporting Tasmanian employers to better understand and respond to family violence. In 2018, Our Watch released the *Workplace Equality and Respect Standards*⁴⁵, a freely available online resource to help workplaces recognise what is needed to better respond to family violence. In addition, the Tasmanian Government has committed to establishing an Our Watch Primary Prevention Officer, a nation-first, who will build primary prevention capacity, capability and expertise in Tasmania.

Family violence is also addressed in Tasmania through Safe at Home, Tasmania’s whole-of-government integrated criminal justice response to family violence, which is underpinned by the *Family Violence Act 2004* (Tas). It involves a range of services working together to address the risk and safety needs of victims and children, and hold perpetrators accountable. It uses a pro-arrest, pro-prosecution policy to address family violence, complemented by a human services approach to support recovery and change.

There are many factors that stop women who are experiencing family violence from seeking help, especially



women from culturally and linguistically diverse backgrounds. As a Government we need to ensure that all women affected by family violence are aware of the services available to them. *Our Multicultural Island: Tasmania's Multicultural Action Plan 2019-2022* aims to ensure that our multicultural communities have access to these services, taking into account the cultural and linguistic diversity of our community. For any community, family violence is destructive. We all have a responsibility to build communities that are safe, harmonious, inclusive and respectful for women and girls.

Housing and homelessness for women

The consequences of women's homelessness are multi-faceted and intergenerational. Homeless adult women have poorer outcomes in the domains of health, emotional and general wellbeing, relationship stability, nutritional outcomes, and economic wellbeing.

Housing security is critical for health and wellbeing, yet women are increasingly forced into homelessness by factors

such as poverty and family violence and the associated financial insecurity it causes. Unaffordable rents and insecure tenure also contribute to physical and psychological stresses experienced by women. Consistent with these trends, there has been an increase in the number of older women in housing stress over the last decade.

Tasmania's Affordable Housing Strategy 2015-2025 seeks two outcomes that indirectly address the housing needs of women, who are over-represented among those most in need:

1. a decrease in the proportion of low-income Tasmanians experiencing housing stress; and
2. a decrease in the proportion of Tasmanians experiencing homelessness.

The Tasmanian Government's record investment of \$258 million over eight years under the Affordable Housing Strategy is being delivered under the completed Action Plan 1 (2015-2019) and now under Action Plan 2 (2019-2023). The Tasmanian Government currently provides over 12,500 social housing dwellings and assists hundreds of Tasmanians every month with

their housing needs, ranging from homelessness services to affordable home ownership. The supply of housing and access to services for Tasmanians experiencing housing stress will continue to increase, which is on track to meet the target of assisting 3,600 households under the Affordable Housing Plans 1 and 2 by 2023.

Specific housing initiatives for women include 14 new units of homeless accommodation prioritising women and families, which was completed in the September 2019 quarter. This includes a new women's shelter in Southern Tasmania managed by CatholicCare and six additional family sized homes managed by the Hobart Women's Shelter. Under the *Family Violence Rapid Rehousing* initiative, 210 households affected by family violence were safely housed into affordable private rentals as at 30 December 2019. Women and their families are also benefiting from the Private Rental Incentive Scheme, which assisted nearly 100 households into long-term housing under AHAP 1, and will expand to assist a total of 310 households by the completion of AHAP 2.



Carers

Another significant factor impacting on women's health and wellbeing can be their role as the primary carer for children and other family members, including those with disability and elderly relatives. According to 2018 Australian Bureau of Statistics data, there are 1.96 million unpaid carers in Australia.⁴⁶ An estimated 80,600 Tasmanians are informal carers, of which 26,500 are primary carers.⁴⁷ Just under half (39.7 per cent) of all informal carers in Tasmania are women, but women are more likely to be primary carers (16,700 females compared to 10,100 males).

Women who are carers report that their own health needs are sidelined as they prioritise the needs of their family members.⁴⁸

Women with disability

Accessible Island: Tasmania's Disability Framework for Action 2018-2021 was launched in January 2018. Each Government department has

developed a Disability Action Plan to deliver *Accessible Island*, which is published on their websites. Once a year, Government departments submit a progress report to the Premier's Disability Advisory Council. *The First Year Report on Agency Implementation* was published (web only) in June 2019.⁴⁹

In recognition of the concerns raised around violence against people with disability, the Australian Government established the *Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability* on 4 April 2019. The Tasmanian Government has made a commitment to supporting this important process. Women with disability are at a heightened risk of gender-based violence than other women, and the abuse may be more severe and last for a longer period. The Terms of Reference for the Royal Commission direct Commissioners to have regard to the specific experiences of violence against, and abuse, neglect and exploitation of, people with disability influenced by sex, gender, gender identity, sexual orientation and intersex status. The Commissioners are

required to provide a final report by 29 April 2022, and the Royal Commission will help to inform Australian governments, institutions and the wider community on how to prevent, and better protect, people with disability from experiencing violence, abuse, neglect and exploitation in the future.

Actions

Action 4.1

Implement the Government's coordinated, whole-of-government action plan to respond to family and sexual violence by addressing three priority areas:

- primary prevention and early intervention;
- response and recovery; and
- strengthening the service system.

(Department of Communities Tasmania)

Action 4.2

Through the Safe Families Coordination Unit, continue to support actions under *Safe Homes, Families, Communities: Tasmania's action plan for family and sexual violence 2019-2022*, by providing cumulative assessments of risk and harm to ensure:

- coordinated support to those affected by family violence (including children); and
- a coordinated response to hold perpetrators to account.

(Department of Police, Fire and Emergency Management)
(Through the Safe Families Coordination Unit, a multi-agency unit also involving the Department of Health, Department of Communities Tasmania, Department of Health and Department of Justice)

Action 4.3

Continue to embed a respectful relationships approach in schools, and promote resources and professional learning for teachers. (Department of Education)

Action 4.4

Continue to support the trial of electronic monitoring of high-risk family violence offenders, with opt-in available for victims/survivors. (Department of Police, Fire and Emergency Management/Department of Justice)

Action 4.5

Continue to work with the Safe at Home Coordination Unit to ensure the provision of specialist police prosecution services for family violence in response to demand for services. (Department of Police, Fire and Emergency Management/Department of Justice)

Action 4.6

Implement *Respect and Protect Older Tasmanians: Tasmania's Elder Abuse Strategy 2019-2020*. (Department of Communities Tasmania)

Action 4.7

Continue to implement Tasmania's Affordable Housing Action Plan 2 to deliver new supply, improved access and responsive services. This includes new units of homeless accommodation for the Launceston Women's Shelter, as well as more homeless accommodation for women in the South constructed in partnership with CatholicCare. (Department of Communities Tasmania)

Action 4.8

Construct new units of homeless accommodation for older women and men in the South for the Wirksworth Integrated Aged Care Facility. (Department of Communities Tasmania)

Action 4.9

Implement the *Tasmanian Carer Action Plan 2017-2020* to increase the level of recognition of carers; improve support and services to carers; and include carers in the development and evaluation of policies, programs and services. (Department of Communities Tasmania)

Action 4.10

Implement *Accessible Island: Tasmania's Disability Framework for Action 2018-2021*. Accessible Island contains over 90 actions to implement socially just policies and practices for people with disability. (Department of Communities Tasmania)

Action 4.11

Address cost of living impacts on women's health by implementing the *Financial Security for Women Action Plan 2018-2021*. (Department of Communities Tasmania)



5. Facilitating health and wellbeing across the life course

Women's health is influenced by a range of factors, including socioeconomic circumstances; physical environments; adverse childhood events; culture; family responsibilities; sex, gender and sexuality; individual biology; and access to quality health care programs and services.

These in turn have an influence on risk factors for poor health and wellbeing, such as physical and recreational activity levels; access to safe, nutritious and affordable food; healthy eating habits; smoking tobacco; alcohol consumption; and illicit drug use.

Healthy living across the life course

An effective response to improving the health and wellbeing outcomes of women and girls requires adopting a life course approach to embedding programs that facilitate health and wellbeing from birth and throughout life. This means ensuring there are a range of whole of community programs, in addition to targeted programs and interventions promoting health and wellbeing across the life course.

An effective response also requires addressing key risk factors that



reduce the quality of life for women as they age. For example, ensuring that there are a range of programs for older women aimed at building musculoskeletal health and reducing the likelihood of injury or fracture. It also means addressing the risk factors associated with dementia and the palliative care needs of women.

It is important to take a comprehensive approach to improving women's health across the life course recognising that women and girls can experience a range of diverse health needs and risks, and a person's health at each stage of life affects health at other stages.⁵⁰ As a result, identifying the most appropriate interventions across the life course is important, as well as responding to the

different needs of population groups.

The Tasmanian Government is delivering a range of programs to improve the health and wellbeing of all Tasmanians, including women. The *2018-2021 Department of Education Child and Student Wellbeing Strategy: Safe, Well and Positive Learners* was published on 28 June 2018. 'Healthy' is one of the six wellbeing domains, which includes a focus on physical and mental health. Between 19 August 2019 to 13 September 2019, all state school students in Years 4-12 undertook the Student Wellbeing Survey. This will continue annually from March 2020.

The Department of Health is delivering key actions under the *Healthy Tasmania*

Five Year Strategic Plan to develop new approaches to preventive health across the priority areas of smoking, healthy eating and physical activity, community connections, and chronic condition screening and management. In 2018-19, the Department of Health administered the *Get Active Program* to increase the engagement of people in physical activity, especially those living in disadvantaged areas in Tasmania. Participants are primarily female (an average of 86 per cent female in 2016 and 2017).

The Tasmanian Government is committed to fostering the wellbeing of all Tasmanian children and notes the release of the Commissioner for Children and Young People Tasmania's report on *Investing in the Wellbeing of Tasmania's Children and Young People* on 11 February 2020. At the time of this Action Plan, the Government was considering the report and its recommendations.

Reducing tobacco, alcohol and drug consumption

Risk factors such as smoking tobacco, consuming alcohol, and illicit substance use increase the likelihood of poor health.⁵¹ Illicit use of drugs can cause death and disability and is a risk factor for many diseases. The National Drug Strategy Survey found that illicit drug use has increased in Tasmania among both males and females aged 14 years and over since 2010. Furthermore, the 2016 National Drug Strategy Survey found that 15.8 per cent of females aged 14 years and over had used an illicit drug in the previous year, which was an increase by 5.4 per cent from 2010.⁵²

While there has been a long-term downward trend in alcohol consumption at risky levels among Australian females, in 2016 more than one in ten Tasmanian women were considered 'risky' drinkers (10.5 per cent) by the National Health and Medical Research Council Guidelines⁵³.

There continues to be gradual declines in the percentage of mothers who report consuming alcohol during pregnancy, from 7.6 to 4.0 per cent between 2012 and 2016. However, the

rate for older mothers aged 40 years and over is the highest at 7.0 per cent.

Alcohol is associated with significant health harms. It has a depressive effect on the central nervous system, is a Group I carcinogen, and is a known cause or component in more than 200 health conditions including stroke, ischaemic heart disease, bowel cancer and liver cirrhosis. It is estimated that alcohol is associated with one in five incidents of breast cancer.

Women are disproportionately affected by alcohol-related health problems compared to men. Women reach intoxication quicker, become alcohol dependent sooner, and develop alcohol-related problems faster than men with similar drinking patterns. This is due to differences in body composition.

While there has been a gradual decline in smoking rates for females in Tasmania over the last decade, from 23.4 per cent in 2007-08 to 15.7 per cent in 2017-18⁵⁴, tobacco use is still a concern. The *Tasmanian Tobacco Control Plan Progress Report 2019* (the Tobacco Control Plan) demonstrates the need to continue the focus on reducing tobacco use. An average of 559 Tasmanians (female and male) die each year from tobacco use.⁵⁵ The Government will continue work to reduce smoking rates for women and girls.

In Tasmania, it is estimated that more than 60,000 alcohol and other drug (AOD) treatment sessions are provided annually to all sexes across government and non-government settings. While the Government supports a number of government and non-government run residential rehabilitation programs for those requiring more intensive care across the State, it has also provided funding towards a women's only facility.

The Government understands the impact of long-term use and addiction, and will soon be releasing the Reform Agenda for the Alcohol and Drug Sector in Tasmania. This aims to ensure better treatment and integration of services, which is easy to navigate for patients, their family and loved ones.

Increasing physical activity

While regular physical activity is important to both physical and mental health, the 2019 *Health of Australia's Females* report by the Australian Institute of Health and Welfare (AIHW) found that only two in five Australian women aged 18 and over are sufficiently physically active for health (and only one in four women aged 65 and over).⁵⁶ Physical activity greatly decreases the risk of cardiovascular disease and other chronic conditions. The current guidelines established by the Australian Government Department of Health recommend that adults aged between 18-64 years engage in at least five sessions per week of 150-300 minutes of moderate exercise, or 75-150 minutes of rigorous exercise.⁵⁷ Less than half of Australian women meet physical activity guidelines.⁵⁸

AusPlay data shows that 64.6 per cent of Tasmanian women and girls regularly participate (three times a week or more) in sport and recreation.⁵⁹ Tasmanian women have indicated that work and family commitments limit their access to physical recreation.⁶⁰

Environments to support active living

Tasmanians have access to some of the best recreational opportunities and natural environments within Australia. Utilising the built and natural environment in such a way that encourages physical activity is an important factor in creating a more active Tasmania. The importance of creating an urban environment that encourages walking, cycling, social interaction and other physical activity in a visually stimulating and attractive manner cannot be underestimated.⁶¹

Supporting good nutrition

The 2013 Australian Dietary Guidelines recommend that females consume a minimum of two serves of fruit and five serves of vegetables each day, depending on age, to ensure good nutrition and health.⁶² In 2017-18, less than one in

ten Australian women met both the fruit and vegetable intake guidelines.⁶³ This proportion varies by population groups, as women living in the highest socioeconomic areas are 1.4 times more likely to be eating enough vegetables than women in the lowest socioeconomic areas (12 per cent and 8.3 per cent respectively).⁶⁴ Poor nutrition is a major contributor to preventable burden of disease in Australia.⁶⁵ An analysis of the combined effects of all dietary risks included in the AIHW's *Australian Burden of Disease Study* (2016) suggests poor diet accounts for 7.3 per cent of the burden of disease.

Various international key bodies^{66,67} agree that no one strategy alone will improve eating habits and a range of strategies that focus on food literacy, food environments and governance (including policy development, monitoring and surveillance, workforce development and intersectoral action) are required. The Government will continue implementing a range of strategies to promote healthy eating under the *Healthy Tasmania Five Year Strategic Plan*.

Actions

Action 5.1

Continue to implement key actions under the *Healthy Tasmania Five Year Strategic Plan*, which was released in 2016 to support Tasmanians to make healthy lifestyle changes across all stages of life, including:

- implementing strategies to promote healthy eating, increase physical activity and reduce smoking (Department of Health);
- administering the Healthy Tasmania Community Innovation Grants program (Department of Health); and

- convening the Premier's Health and Wellbeing Advisory Council to provide advice on cross-sector and collaborative approaches to improving the health and wellbeing of Tasmanians. (Department of Premier and Cabinet).

Action 5.2

Take measures to increase women's representation on state sporting organisation boards to 20 per cent by 2020, 30 per cent by 2021 and 40 per cent by 2022. The levels of women's representation must be met for the organisation to be eligible under the Sport and Recreation State Grants Program. (Department of Communities Tasmania)

Action 5.3

Promote women's and girl's increased participation in sport, recreation and physical activity. (Department of Communities Tasmania)

Action 5.4

Develop a Women in Sports Strategy. (Department of Communities Tasmania)

Action 5.5

Develop and increase safe cycle routes (in consultation with the Bicycle Network). (Department of State Growth)

Action 5.6

Continue to implement Ticket to Play, a sports voucher system to boost participation in sport and physical activity for Tasmanians aged five to 17, whose parent or guardian holds a Centrelink Health Care Card or Pensioner Concession Card or who are in Out of Home Care. (Department of Communities Tasmania)

Action 5.7

Through the *Move Well Eat Well* program, work collaboratively with a range of government and non-government service providers to develop frameworks, tools and resources to assist early childhood services and school communities to promote physical activity and healthy eating. (Department of Education/ Department of Health)

Action 5.8

Implement the Australian Curriculum: Health and Physical Education in all state schools from Foundation to Year 10, including the sub-strand 'contributing to healthy and active communities'. (Department of Education)

Action 5.9

Build on the foundations of good health throughout school years and provide information and support for healthy body image. (Department of Education)

Action 5.10

Implement the *2018-2021 Child and Student Wellbeing Strategy* to ensure that learners are safe, feel supported and are able to flourish so they can engage in learning. (Department of Education)

Action 5.11

Establish new ways to encourage Tasmanians to use our parks and reserves to increase their physical activity. (Department of Primary Industry, Parks, Water and Environment)

Action 5.12

Implement *Strong Liveable Communities: Tasmania's Active Ageing Plan 2017-2022* to support older Tasmanians in making informed choices about their health and wellbeing. There are a number of initiatives under this Plan to improve strength, resilience and participation for older Tasmanians, as well as programs to support affordable, healthy eating. (Department of Communities Tasmania)

Implementation

Governance

The Department of Communities Tasmania will oversee the implementation of the Plan through the State Government's Tasmanian Women's Strategy Interdepartmental Committee.

Consultation

Over the life of the Plan, there will be consultation with diverse groups of women (for example, Aboriginal, refugee and migrant women, women with disability, women who are carers and older women), in relation to implementation of the *Tasmanian Women's Strategy 2018-2021* and the *Health and Wellbeing for Women Action Plan*.

Monitoring progress

The Tasmanian Government has made a commitment to release biennial time series data that includes the mapping of key indicators across a number of domains, including health and wellbeing for women.

The health and wellbeing indicators include:

- Self-assessed health status
- Mental health
- Disability
- Leading causes of death
- Health and lifestyle
- Smoking
- Alcohol
- Illicit drug use
- Sexually transmitted infections
- Weight
- Sport and physical recreation.

Current Programs in this Area

For more information on what the Government is currently doing to increase and promote women and girls' health and wellbeing, refer to the *Tasmanian Women's Strategy 2018-2021*. Progress reports are published on-line annually.

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