

Safe, Well and Connected: Victorian Local Government Action Plan for Women's Health 2008-2012

Health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity. Women's health involves their emotional, social and physical wellbeing and is determined by the social, political and economic context of their lives, as well as by biology.

The United Nations Division for the Advancement of Women, 1951¹

Introduction

Why Women's Health Matters

Women have different health and wellbeing needs from men. There is growing evidence that gender is an important determinant of health and wellbeing. Therefore women need healthcare, social support, programs, services and policies that are tailored to women's bodies and mindful of their social roles.

As is stated in the 10 Point Plan:

There are some health and wellbeing issues that affect women more than men, such as arthritis, osteoporosis and eating disorders. There are some conditions that affect women differently than they affect men. Heart attacks and HIV/AIDS are two of the more serious conditions that doctors sometimes overlook in women, because the signs and symptoms look different than they do in men. And there are some conditions that only affect women, such as pregnancy, childbirth and menopause.²

Additionally, the roles of women in society lead to experiences such as violence³ and carer responsibilities⁴ being more prevalent among women than men. Too often, 'women's health' is reduced to 'reproductive health', however women's health is much more than this.

The *Setting an Agenda* discussion paper goes further to note that:

Similarly for men, there is a range of health issues that only affect them (such as prostate cancer), that are more common to men (alcohol use, lung cancer, pulmonary disease, hearing loss) and that are related to gender roles (stress related to overwork, lack of social connectedness, suicide).⁵

A gender-focused approach to council planning and service and program provision recognises and responds to the needs of both men and women within your Council. Additional information about Gendered Policy Frameworks is available at http://www.whv.org.au/health_policy/gender.htm.

Social Determinants of Health

There is a need to create and maintain Council policies, programs and services that focuses on social, economic and cultural determinants of health. The 10 Point Plan draws attention to 12 determinants of health which it identifies as:

- Gender
- Income and social status
- Employment status
- Education
- Social environment (including social support and social exclusion)
- Physical environment (including access to food, housing and transport)
- Healthy child development

- Personal health practices and coping skills
- Health services
- Social support networks
- Biology and genetic endowment
- Culture⁶

Issues that Impact on Women's Health and Wellbeing

Taking into account the above determinants of health, some examples of factors affecting women's health and wellbeing were outlined in the *Setting An Agenda* discussion paper:

- 57 per cent of women participate in the paid workforce (compared to 72 per cent of men).7
- Victorian women working full time still only earn 86 per cent of men's income.8
- 71 per cent of primary carers in Australia are women.9
- Women account for 83 per cent of single parents in Australia. Lone mothers tend to have younger children living with them more often than lone fathers.¹⁰
- One in four women will experience depression at some time in their lives. 11
- Women represent nearly 90 per cent of reported rapes and 76 per cent of reported sexual assaults¹². It is widely acknowledged that around 80 per cent of sexual assaults go unreported.¹³
- After financial difficulty, domestic violence is the leading cause of homelessness in Victoria, with women and children still being forced, in the majority of cases, to flee the family home.¹⁴

These statistics highlight the importance of responding to women's needs within your Council, as part of working towards social equity within your municipality.

Priority Issues

Women's health organisations across Victoria have identified four key priority areas for Victorian women, which are:

- Prevention of violence against women (relating to women's *safety*)
- Women's economic participation (relating to women's sense of *connectedness*)
- Women's sexual and reproductive health (relating to women's *wellness*)
- Women's mental health and emotional wellbeing (relating to women's wellness)

Legal Context

The *Victorian Charter of Human Rights and Responsibilities Act 2006* (Charter) came into full effect on 1st January, 2008¹⁵. The Charter outlines some of the rights and responsibilities for everybody in Victoria, including: liberty and security; protection of families and children; taking part in public life; freedom from forced work and slavery; protection from torture and cruel, inhumane or degrading treatment; and some cultural rights.¹⁶

As the third tier of government in Victoria, all Council plans, programs and services are legally obliged to be aligned with the rights outlined in the Charter. Councillors therefore have a responsibility to work towards all women within their municipality being able to enjoy the human rights recognised by the Charter without discrimination.

ACTIONS FOR COUNCIL

If elected, will you move and/or support motions to introduce these nine actions?1

- (1) Develop a women's health and wellbeing strategy and action plan that:
 - Addresses issues for all women in your municipality including women with a disability, women carers, lesbians, indigenous women, women from culturally and linguistically diverse backgrounds, older and young women including young mothers, and women with low socio-economic status;
 - Addresses economic participation, mental health, sexual and reproductive rights and violence against women;
 - Is developed and overseen by a women's committee that includes representation from each of the above target groups;
 - Develops a demographic profile for women in your community, including for each of the above target groups; and
 - Ensures that women's needs are considered in council research, planning and reporting.

Women's Safety

- (2) Partner with Women's Health West to develop a western region strategy to prevent violence against women;
- (3) Introduce a local law making it mandatory for licensed brothels to post a sign stating that sexual slavery is a crime and outlining where to seek help.

Women's Wellness

- (4) Sponsor one officer and one community member to attend the Sixth National Australian Women's Health Conference, to be held in Hobart, Tasmania, 18-21 May, 2010.
- (5) Address women's mental health in your Council's Municipal Public Health Plan. Consider mental illness, psychiatric and intellectual disability in Council disability strategies.

Women's Connectedness

- (6) Improve women's economic participation by:
 - Introducing a disadvantaged jobseekers employment and training program that aims to ensure women's access to Council employment.
 - o Supporting family friendly employment practices within Council.²
 - Providing adequate and affordable council and community-based childcare and playgroups.
- (7) Increase Council recreation, exercise and gathering opportunities for women.³
- (8) Advocate for more frequent, reliable and accessible public transport, including the provision of new routes and services where applicable.

¹ Or, where your council has already undertaken this action, will you commit to providing ongoing support for this action.

² Including through offering 48/52 (where employees can take an additional four weeks unpaid annual leave), and parental and carers leave.

³ For example by providing infrastructure for women's sports such as netball, requiring clubs to enhance women's participation where they use council facilities, and providing no or low-cost community meeting spaces.

General

- (9) Recognise and encourage women's participation by:
 - Holding an annual council awards ceremony that recognises the contributions of women in your municipality.
 - o Supporting the *Year of Women in Local Government* (2010)⁴.
 - o Considering appointing a councillor for women

⁴ This year aims to promote and increase women's participation in local politics and encourage women into management roles in local government.

APPENDIX: Community Consultations

Working on behalf of women's health organisations across Victoria, Women's Health In the North conducted consultations with over 100 women and service providers, in the form of face-to-face consultations and on-line surveys, to identify actions councils could take. Throughout the consultation process, priority was given to the following target groups of women:

- Young women
- Older women
- Women from a Culturally and Linguistically Diverse (CALD) background
- Women with a disability and/or mental illness
- Women carers
- Indigenous women
- Lesbians
- Women from a low socioeconomic background

Most common issues for women across all consultations relating to women's sense of being *Safe, Well and Connected* were:

Safe

- Feeling safe within the community, especially when travelling and walking at night.
- Violence against women, particularly within their homes. Women articulated the need for public action on this
 issue.

Well

- Mental health and emotional wellbeing.
- Access to adequate and flexible healthcare services.
- Low-cost exercise and fitness options.

Connected

- The availability of transport, particularly in outer suburban regions where public infrastructure is less developed.
- Low-cost community groups, events, programs and/or spaces that foster a sense of community connectedness. This included better promotion of existing community groups, events and programs.

In addition to the health and wellbeing issues outlined above, some were specific to particular groups of women, as summarised below:

- Accessible public transport, public toilets and public spaces for women with a physical disability, including older women. Increased community access for women with a visual impairment.
- The need for adequate respite for women who care for somebody with a disability, chronic illness or mental illness, including young carers. This issue impacted markedly on the emotional and social wellbeing of carers.
- The need for adequate housing and meaningful employment was identified by Indigenous women.
- Homophobia and frequent discrimination were identified by lesbian women.
- Women from a CALD background discussed the need for council programs, initiatives and services to be more
 inclusive and accessible to them, particularly by addressing language barriers. CALD women also identified
 barriers to accessing employment which matched their qualifications.
- Young women who were identified to be 'at risk' often experienced emotional and mental health difficulties.

¹ The United Nations Division for the Advancement of Women (1995). The United Nations Beijing Declaration and Platform for Action. http://www.un.org/womenwatch/daw/beijing/platform/health.htm Accessed on 20/10/2008.

² Women's Health Victoria, 2006, *Women's Health Matters: From Policy to Practice. 10 Point Plan for Victorian women's health 2006-2010.*

³ Victoria Police (2005). Victoria Police Provisional Crime Statistics: Victims of Crime Against the Person. www.police.vic.gov.au/files/documents/615_Victims-2004-05.pdf Accessed on 20/10/2008.

⁴ Australian Bureau of Statistics (2004). Disability, Ageing and Carers, Australia: Summary of Findings, 2003, Cat. 4430.0. Australian Bureau of Statistics, Canberra.

- ⁵ Women's Health Victoria, 2006, Setting An Agenda: Discussion Paper to Women's Health Matters: From Policy to Practice 10 Point Plan for Victorian women's health 2006-2010.
- ⁶ Health Canada (1999) Health Canada's Women's Health Strategy, Health Canada, Ottawa as cited in Women's Health Victoria, 2006, Women's Health Matters: From Policy to Practice. 10 Point Plan for Victorian women's health 2006-2010.
- ⁷ Australian Bureau of Statistics (2005). Labour Force, March 2006, Cat. 6202.0. Australian Bureau of Statistics, Canberra as cited in Women's Health Victoria, 2006, *Setting An Agenda: Discussion Paper to Women's Health Matters: From Policy to Practice 10 Point Plan for Victorian women's health 2006-2010*, p. 8.
- ⁸ Australian Bureau of Statistics (2005). Average Weekly Earnings, August 2005, Cat. 6302.0. Australian Bureau of Statistics, Canberra as cited in Women's Health Victoria, 2006, *Setting An Agenda: Discussion Paper to Women's Health Matters: From Policy to Practice 10 Point Plan for Victorian women's health 2006-2010*, p. 8.
- ⁹ Australian Bureau of Statistics (2005). Australian Labour Market Statistics, October 2005, Cat. 6105.0. Australian Bureau of Statistics, Canberra as cited in Women's Health Victoria, 2006, *Setting An Agenda: Discussion Paper to Women's Health Matters: From Policy to Practice 10 Point Plan for Victorian women's health 2006-2010*, p. 8.
- ¹⁰ Australian Bureau of Statistics (2003). Australian Social Trends, Cat. 4102.0. Australian Bureau of Statistics, Canberra as cited in Women's Health Victoria, 2006, *Setting An Agenda: Discussion Paper to Women's Health Matters: From Policy to Practice 10 Point Plan for Victorian women's health 2006-2010*, p. 8.
- ¹¹ Rice K and Tsianakas V (2004). Gender Impact Assessment: Depression, Women's Health Victoria, Melbourne, as cited in Women's Health Victoria, 2006, *Setting An Agenda: Discussion Paper to Women's Health Matters: From Policy to Practice 10 Point Plan for Victorian women's health 2006-2010*, p. 14.
- ¹² Victoria Police (2005). Victoria Police Provisional Crime Statistics: Victims of Crime Against the Person. www.police.vic.gov.au/files/documents/615_Victims-2004-05.pdf Accessed on 26/04/2006 as cited in Women's Health Victoria, 2006, Setting An Agenda: Discussion Paper to Women's Health Matters: From Policy to Practice 10 Point Plan for Victorian women's health 2006-2010, p. 13.
- ¹³ Australian Bureau of Statistics (2005). Crime and safety, Australia. Cat. 4509.0. Australian Bureau of Statistics, Canberra as cited in Women's Health Victoria, 2006, *Setting An Agenda: Discussion Paper to Women's Health Matters: From Policy to Practice 10 Point Plan for Victorian women's health 2006-2010*, p. 13.
- ¹⁴ Australian Institute of Health and Welfare (2005). SAAP National Data Collection Annual Report 2003-04: Victoria Supplementary Tables. www.aihw.gov.au/publications/hou/saapndcar03-04vic/saapndcar03-04vic.pdf Accessed on 26/04/2006 as cited in Women's Health Victoria, 2006, Setting An Agenda: Discussion Paper to Women's Health Matters: From Policy to Practice 10 Point Plan for Victorian women's health 2006-2010, p. 13.
- ¹⁵ Victorian Equal Opportunity and Human Rights Commission (2008). *The Victorian Charter of Human Rights and Responsibilities explained.* http://www.humanrightscommission.vic.gov.au. Accessed on 22/10/2008.
- ¹⁶ State Government Victoria (2006). *The Charter of Human Rights and Responsibilities: Protection of Freedoms and Rights for Everyone in Victoria.*