

Women's Health Matters Submission to the ACT Budget 2023-24

Women's Health Matters (WHM) welcomes this opportunity to make a submission for the 2023-24 ACT Budget. WHM is an independent, non-partisan think tank that works to improve the health and wellbeing of all women in the ACT and surrounding regions. We seek to improve access to health information and enhance knowledge and understanding about the causes of health and illness among anyone who identifies as a woman.

We advocate on behalf of all ACT women, especially those experiencing disadvantage and vulnerability. We want women to feel in control of and understand the determinants of their own health and wellbeing.

We do this through health promotion and by providing evidence-based social research, policy development and advocacy services to governments, the corporate sector, policy makers, service providers and peak bodies.

WHM's priorities for the ACT Budget 2023-24 are:

1. Improved health outcomes for women in the ACT

- a) Development and implementation of a Sexual and Reproductive Health Strategy.
- b) Additional investment in a Communications package to improve access to abortion in the ACT.
- c) Increase access to subsidised health services for women and people who have experienced sexual violence.
- d) Provide ongoing investment in Assisted Reproductive Technology, including implementation of WHM report recommendations and additional scoping.

2. Women's safety

- a) Invest in the implementation of recommendations outlined in the *Listen. Take Action to Prevent, Believe and Heal* Report, including
 - a. Mapping, optimising, identifying and addressing gaps in data collection on sexual violence in the ACT, as part of the commissioning of a Sexual Violence Data Collection Framework.
 - b. Investing in community-led training to prevent sexual violence, including active bystanders approaches.

Improved health outcomes for women in the ACT

Sexual and reproductive health strategy for the ACT

The ACT has recently undertaken a number of new sexual and reproductive health initiatives, including reviewing Assisted Reproductive Technologies (ART) in the ACT and the 2022-23 Budget Initiative to remove out of pocket costs for abortion.

In this context, there is a need for an overarching Sexual and Reproductive Health Strategy for the ACT. Such a strategy should have universal access to sexual and reproductive health care as a goal and be underpinned by principles of reproductive justice and choice. A strategy would ensure alignment of the ACT's sexual and reproductive health initiatives and the identification of and ability to address remaining gaps preventing universal access.

We recommend funding the development and implementation of a Sexual and Reproductive Health strategy for the ACT.

Navigation for abortion care

WHM has been pleased to see the investment in removing out of pocket costs for abortion care in the ACT, announced in the 2022-23 Budget. We are also pleased to see that within the Budget Initiative, \$30,000 is allocated to deliver a communications package about abortion in the ACT with \$15,000 expected to be disbursed in the first financial year funding allocated to communications within this announcement.

We see this investment as a good starting point for the creation of a basic website. However, we have heard through consultation that there is need for ongoing funding for maintenance and to meet the website accessibility requirements and expectations of the community. We urge the government to consider ongoing funding for maintenance, accessibility and to support system navigation.

Additionally, there is a risk with setting up a health and service information website with no funded capacity to monitor and answer inquiries about the information. It is our view that this may limit the capacity of the Budget Initiative to reach all eligible women and people with uteruses, particularly those experiencing intersecting disadvantage. It will also limit the ability to monitor the Initiative and provide two-way feedback to address emerging challenges. This risk could be mitigated by the establishment of a health information and referral phone, similar to 1800 My Options in Victoria.

While it services a significantly larger population than the ACT and would therefore cost more to deliver, we note that the sexual and reproductive health information and referral phonenumber for Victoria, 1800 My Options, was refunded in 2021 with \$1.67 million for an additional four years of service delivery¹ and includes a geospatial map and health information website. This announcement provides some indication of the cost of such a service. It could be possible to build a bespoke website for the ACT, or build off existing infrastructure and investment.

We strongly recommend additional funding is provided for the establishment of an information and referral phonenumber.

¹ <https://whv.org.au/resources/whv-publications/access-trusted-service-guaranteed-1800-my-options-celebrates-3rd>, accessed 17 March 2023.

Subsidised health services for sexual violence victims/survivors

Emerging evidence shows that experiencing domestic, family, and sexual violence leads to poorer health outcomes and higher healthcare costs. The Australian Longitudinal Study on Women's Health (ALSWH) found in 2022 that people who have experienced sexual violence are up to 45% more likely to have high levels of financial stress and report worse physical and mental health, and was related to higher health service use costs.²

Based on these findings, the ALSWH recommends that health and support services for women who have experienced sexual violence should be subsidised or free. The strong association between poor health outcomes, sexual violence and financial stress demonstrates a need for subsidised access to health services.

In the ACT, the Women's Health Service (WHS) offers free services for women, including counselling and primary care, who find it difficult to access health services due to violence, abuse or neglect, including domestic, family and sexual violence. However, WHS currently has only 12 GP hours available each week and wait times for counselling services may be more than 6 months, meaning many women who have experienced violence currently need to access services through the private health system to access care. The ALSWH study indicates that 51% of women in their twenties, 34% in their late forties, and 26% in their late sixties to early seventies have experienced sexual violence, which indicates that WHS is unlikely to be able to provide services to all women who have experienced sexual violence, or to relieve their higher health service use costs.

We recommend the expansion of the WHS to provide subsidised healthcare to women who have experienced sexual violence.

Assisted Reproductive Technology

In April 2021, the Legislative Assembly passed a motion calling on the ACT Government to review access to Assisted Reproductive Technology (ART) in the ACT. The Health and Policy Strategy Branch of ACT Health Directorate which had responsibility for preparing a response to the motion invited WHM to engage with consumers to inform the response, in particular relating to the availability of support services, the establishment of a regulatory framework, and the accessibility of ART for individual from low socio-economic backgrounds.

WHM's research with consumers in the ACT found,³ among other themes, that cost was a significant barrier, in particular for single people, LGBTIQ+ people and people using surrogates, and that there were as a lack of peer-based support for people accessing ART. WHM recommended that the ACT Government establish or support the establishment of a public fertility services or low-cost option for ART, with a focus on access for LGBTIQ+ and single people. WHM also recommended that the ACT Government consider the development of and promote peer support options for people undergoing ART.

² <https://www.anrows.org.au/publication/a-life-course-approach-to-determining-the-prevalence-and-impact-of-sexual-violence-in-australia-findings-from-the-australian-longitudinal-study-on-womens-health/>, accessed 28 March 2023.

³ <https://www.womenshealthmatters.org.au/wp-content/uploads/2022/06/Womens-Health-Matters-ART-report-FINAL.pdf>, accessed 27 March 2023.

We recommend that these actions are considered in the context of the 2023-24 Budget.

Women's safety

In 2021, the Sexual Assault Prevention and Response Reform Committee handed down the *Listen. Take Action to Prevent, Believe and Heal* report to the ACT Government, making 24 recommendations, including that the ACT Government commission a Sexual Violence Data Collection Framework. In 2022, the Government Response to the report agreed in principle to this recommendation.

We recommend investment in mapping and optimisation of existing data sources on sexual violence in the ACT, in addition to the identification of gaps and additional data sources required as part of commissioning a Sexual Violence Data Collection Framework.

Since 2016, WHM has gathered data on women's perceptions of safety and experiences of sexual harassment in public places via the Canberra Safety Map. WHM uses this data to advocate to the ACT government to improve problem spaces. The Safety Map played an important role in providing evidence to justify upgrades to Haig Park.

The report also recommended that the ACT Government fund training to relevant government and community settings on the dynamics of sexual violence, responding to sexual violence disclosures, and sexual violence active bystander training. The Government Response agreed in principle to this recommendation, and to ensuring that frontline services are appropriately equipped to respond to sexual violence.

At the same time, research undertaken by the Australian Human Rights Commission (AHRC) undertaken in 2018 for the Respect at Work report has exposed the widespread prevalence of sexual harassment in Australian workplaces. The report found that 39% of women and 26% of men have experienced workplace sexual harassment in the past five years and highlighting workplaces as a key setting to engage in the prevention of and response to sexual violence.⁴

There is a need to consider the role of workplaces as settings of sexual violence and key points of intervention more generally, rather than focusing on upskilling first responders. This will require training and intervention in both government and non-government workplace settings.

We recommend investing in community-led training to prevent sexual violence, including through active bystander approaches.

WHM has developed the Step up! program to improve women's safety in public places, which is funded for 2022-23 by the Office for Women and the City Renewal Authority. The program includes promotion of WHM's Canberra Safety Map, an active bystander social marketing campaign, and active bystander training package for city-based businesses.

⁴ <https://humanrights.gov.au/our-work/sex-discrimination/publications/respectwork-sexual-harassment-national-inquiry-report-2020>, accessed 28 March 2023.

Wellbeing domain	Budget recommendation	Justification (Wellbeing indicators)
Women's health		
Health	Develop and implement a Sexual and Reproductive Health Strategy.	Overall health Access to health services
	Provide additional investment in communications to improve access to abortion in the ACT.	Access to health services
	Increase access to subsidised health services for women and people who have experienced sexual violence.	Access to health services
	Provide ongoing investment in Assisted Reproductive Technology, including implementation of WHM report recommendations and additional scoping.	Access to health services
Women's safety		
Safety	Invest in the implementation of recommendations outlined in the <i>Listen. Take Action to Prevent, Believe and Heal</i> Report.	Domestic and family violence Feeling safe
	Provide investment to map, optimise, and identify and address gaps in data collection on sexual violence in the ACT, as part of the commissioning of a Sexual Violence Data Collection Framework.	Domestic and family violence Feeling safe
	Invest in community-led training to prevent sexual violence, including active bystanders approaches.	Domestic and family violence Feeling safe