

Women's Health

AUSTRALIAN DEMOCRATS ACTION PLAN WOMEN'S HEALTH HEALTH AND AGEING

Traditionally 'women's health' meant reproductive health but increasing understanding of what affects health – a mixture of biology, culture and the choices we make – has led to the realisation that women's health involves the entire body and is shaped by the biological and social differences between women and men.

*Sadly the Coalition Government hasn't caught up with the times. It is still fixated on **controlling women's fertility**, and ignoring that women are more than the sum of their reproductive parts.*

Our Action Plan

- A national body within the Department of Health and Ageing dedicated to improving the health of all women and girls
- A new National Women's Health Policy developed through extensive consultation with Australian women
- More training for GPs in women's health issues
- Dedicated funding for Women's Health Centres and family planning centres
- Targeted funding to increase awareness of women's specific health risks and needs
- Increased funding for violence prevention programmes, including public education campaigns and training of medical, nursing and allied health personnel
- More resources for crisis services, including refuge accommodation
- Secure and improved recurrent funding for women's health promotion and reproductive and sexual health programs
- Improved involvement of women in decision-making, particularly Indigenous, disabled and culturally and linguistically diverse women
- Anti-smoking and responsible alcohol use programs focussed particularly on young women and pregnant women

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The Issues

While the Health Minister has been busy standing in the way of women's welfare when it comes to fertility – whether it's trying to limit access to IVF, agitating against abortion, neglecting the need for better access to contraceptives – the Howard Government has been overlooking the other physical, mental and emotional health needs of women.

Women at all ages are more likely to be hospitalised and have higher utilisation of GP and primary care services, although GP utilisation is the same as men's if visits for preventive checks are taken out.

Heart disease is the biggest cause of death for women – accounting for ¼ of all deaths – but many women and health professionals are not aware that it strikes women later than men and symptoms, outcomes and responses to treatment are all different.

Women are 2 to 3 times more likely to suffer from depression than men and are more likely than men to experience profound feelings of guilt, and to sleep excessively, overeat and gain weight. Women and men also respond differently to different medications to treat depression.

The proportion of Australian women drinking at risky levels is on the increase, rising from 6% to 11% in the last decade, while the proportion of women who are smokers has stagnated.

Women consume more medications than men, including over-the-counter medications, herbal remedies, and vitamins, which may put them at higher risk for adverse drug reactions

Women tend to make most healthcare decisions for their family. The burden of caring for the sick and aged falls predominantly to women whose physical and mental health declines as a result of their caring responsibilities, including high rates of social isolation, depression, anxiety and fatigue

1 in 4 Australian women suffers domestic violence. This is the biggest cause of health problems for young and middle-aged women.

The National Women's Health Policy and its associated program launched in 1989 brought women's health to the forefront in Australia. It was abandoned as a distinct policy entity in the late 1990s and as a consequence the health needs of women became less of a priority.

See also our *Reproductive Health action plan*.



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