

CONSTITUENT QUESTION

House of Assembly

ASKED BY: Helen Burnet MP

ANSWERED BY: Hon Bridget Archer MP
Minister for Health, Mental Health and
Wellbeing

QUESTION:

My question is from Sophie, in North Hobart: I've been struggling to access appropriate care and resources for endometriosis and adenomyosis in the public system and have in the past faced over eight weeks' wait time for a colposcopy, with the result leading to cancer and then preventative surgery, which could have been avoided with earlier intervention. Will access to women's healthcare become harder if there are cuts to the Health Department?

ANSWER:

Whilst I cannot comment on individual patient circumstances without their consent, I am very sorry to hear of your constituent's medical concerns and hope they are recovering well.

Wait times for outpatient appointments vary according to the clinical category a patient is assigned when their referral is received, ranging from Category 1 (urgent) to Category 3 (non-urgent), with urgent cases prioritised.

I am advised that access to the colposcopy service at the Royal Hobart Hospital also utilises clinical categories for the scheduling of appointments. I am further advised that, currently, all referrals to the colposcopy service at the RHH are seen within recommended time frames.

The Tasmanian Government recognises the challenges faced by women living with endometriosis, and how the condition can affect them in their daily lives.

That is why we have invested in new staff, technologies and a public awareness campaign to help women obtain the care they need, when and where they need it.

We have delivered a new \$4.7 million surgical robot at the Launceston General Hospital for gynaecological and other precision procedures. The robot performed its first operation in September 2025.

While based at the LGH, the surgical robot may also be used for suitable patients from other parts of Tasmania, and supports more minimally invasive procedures, improving outcomes for patients.

Additionally, \$1.2 million has been committed to boost endometriosis awareness and diagnosis, including a social media campaign on how to access services, updating information on the Department of Health website about endometriosis and pelvic pain, public forums, staff training, and delivering more outpatient clinics at the RHH.

GPs can refer to specialist endometriosis gynaecology care in Tasmanian public hospitals. At the RHH, care for endometriosis may be through a medical or surgical pathway. Additional care providers may be included at different parts of the care management journey, such as pelvic floor physios, dieticians, and psychology support.

In addition, Family Planning Tasmania has funding agreements in place with both the State Government and the Australian Government to support their endometriosis and pelvic pain services.

The Department of Health is currently developing Tasmania's first Women's Health Strategy. Developing a Women's Health Strategy presents an opportunity to build on existing initiatives and strengthen care for women and girls across Tasmania's health system. There will be opportunities for targeted consultation to ensure the Strategy appropriately reflects diverse experiences and priorities.



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