



Tasmanian Council of Social Service Inc.

Submission to Select Committee on reproductive, maternal and paediatric health services in Tasmania

February 2024



**INTEGRITY
COMPASSION
INFLUENCE**

About TasCOSS

TasCOSS' vision is for one Tasmania, free of poverty and inequality where everyone has the same opportunity. Our mission is two-fold: to act as the peak body for the community services industry in Tasmania; and to challenge and change the systems, attitudes and behaviours that create poverty, inequality and exclusion.

Our membership includes individuals and organisations active in the provision of community services to Tasmanians on low incomes or living in vulnerable circumstances. TasCOSS represents the interests of our members and their service users to government, regulators, the media and the public. Through our advocacy and policy development, we draw attention to the causes of poverty and disadvantage, and promote the adoption of effective solutions to address these issues.

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Introduction

TasCOSS welcomes the opportunity to provide a submission to the House of Assembly *Select Committee on reproductive, maternal and paediatric health services in Tasmania* ('the Committee').

There is a wealth of evidence demonstrating the importance of comprehensive, affordable and accessible reproductive and maternal health services to general health and wellbeing. The Tasmanian Government has already recognised the importance of early intervention to support children and families – for example, focusing on the first 1000 days of a child's life (from conception to two years old) in the Tasmanian Child and Youth Wellbeing Strategy,¹ and increasing funding to services supporting families to access health and social services during this crucial period of development.²

We also know good sexual and reproductive health is vitally important to general health and wellbeing. However, studies show many Australians experience barriers to accessing sexual health care and/or information, whether through a lack of services (for example, in regional and/or remote locations),³ or a lack of understanding or awareness on the part of medical practitioners relating to their needs and experiences (such as migrant, refugee and CALD communities,⁴ Aboriginal and Torres Strait Islanders, or members of the LGBTQIA+ community).⁵

Health policies and initiatives relating to sexual and reproductive health have also traditionally focused on the needs of those of childbearing age, excluding the needs and experiences of older cohorts, resulting in a lack of understanding and resources relating to certain issues such as menopause which impact those over a certain age. These issues are exacerbated for those who belong to minority groups – for example, recent articles and studies have highlighted the lack of services for transgender men experiencing menopause,⁶ and research has highlighted the difficulties in accessing culturally appropriate sexual or reproductive health care for women from culturally and linguistically diverse communities, including refugees and migrant communities.⁷

We believe it is vitally important for the Committee to frame its work to consider the significant and serious issues facing Tasmanians in accessing healthcare in general, including consideration of underlying

¹ Tasmanian Government, 'It Takes a Tasmanian Village: Child and Youth Wellbeing Strategy' (August 2021), 23.

² The Child Health and Parenting Service (CHaPS) has been funded to expand the Sustained Nurse Home Visiting Program. The goal of the Program is to help parents who need more support in the first 1000 days. [Tasmania's Child and Youth Wellbeing Strategy Annual Report 2022 \(amazonaws.com\)](https://www.tas.gov.au/child-and-youth-wellbeing-strategy-annual-report-2022), 9.

³ Slack-Smith, L, Shackleton, E, Fisher, C, Bosco, A, 'Obstacles rural women face accessing equitable maternal health care' (3 October 2023), accessed at <https://insightplus.mja.com.au/2023/37/obstacles-rural-women-face-accessing-equitable-maternal-health-care/>.

⁴ Khatri, RB, Assefa, Y 2022, 'Access to health services among culturally and linguistically diverse populations in the Australian universal health care system: issues and challenges,' BMC Public Health, no. 22, 880.

⁵ Francisco Perales, 'How stigma impacts LGB health and wellbeing in Australia' The Conversation (4 June 2018), accessed at <https://theconversation.com/how-stigma-impacts-lgb-health-and-wellbeing-in-australia-96904>; Sizemore, J 2022, '[Doctors often aren't trained on the preventive health care needs of gender-diverse people — as a result, many patients don't get the care they need](https://theconversation.com/often-arent-trained-on-the-preventive-health-care-needs-of-gender-diverse-people-as-a-result-many-patients-dont-get-the-care-they-need),' The Conversation, 15 November 2022.

⁶ Kim Napier, 'Transgender men experiencing menopause struggle to access tailored support, so one healthcare worker is starting a podcast' ABC News (20 January 2024), accessed at <https://www.abc.net.au/news/2024-01-20/transgender-men-menopause-podcast/103363772>.

⁷ Anaman, J, King, J & Correa-Velez, I 2017, 'Barriers and facilitators of cervical cancer screening practices among African immigrant women living in Brisbane, Australia,' European Journal of Oncology Nursing, vol 31, 22-29.

factors (such as access to transport, financial security or rural/remoteness) which may be impacting Tasmanians' ability to access timely, appropriate and affordable healthcare.

These issues clearly impact the accessibility and availability of specific reproductive and/or maternal health services and are therefore important considerations for the Committee. For example, Tasmanians seeking advice or prescriptions for contraception or referrals for abortion services will generally have to access these services through a GP. As noted by Women's Health Tasmania in their submission,⁸ 'Tasmanians can wait 6-8 weeks for a GP appointment in the current primary care landscape, a context in which health consumers and health professionals rarely have time to adequately explore treatment options'.⁹

We also recognise that the issues experienced by all Tasmanians – for example, difficulties in accessing bulk-billing general practitioners – are exacerbated for certain communities who may be experiencing multiple and co-occurring disadvantage. Our submission will therefore provide a brief overview of general health issues for Tasmanians, as well as considering the experiences of particular communities experiencing inequalities in accessing and receiving affordable and effective reproductive, maternal and paediatric health services.

Overview of Health services in Tasmania

In our consultations across the state, Tasmanians have clearly and consistently told us that their health and wellbeing is essential to living a good life.¹⁰ Communities across the state have told us they “*value our health above all else*”, and that “*[i]f you have good mental health, anything is possible*”.¹¹ These stories reiterate the importance of access to affordable, high-quality health care, as well as preventative measures which promote good physical and mental health for Tasmanians of all ages and backgrounds.

However, data continues to demonstrate Tasmanians have notably worse health outcomes than the national average, with the lowest rates of self-reported excellent or very good health,¹² the highest rates of multiple chronic conditions,¹³ and the highest rates of adverse lifestyle factors for chronic disease.¹⁴ As TasCOSS has highlighted in previous health-related inquiries,¹⁵ these issues are compounded by existing social inequities such as social disadvantage, with Tasmanians on low incomes or residing in

⁸ Women's Health Tasmania, 'Submission to the Select Committee on reproductive, maternal and paediatric health services in Tasmania' (February 2024).

⁹ Ibid, 7.

¹⁰ [A Good Life: A Wellbeing Framework for Tasmania](#) is a project undertaken by TasCOSS, based on a number of community consultations throughout Tasmania which posed the question, “what do you need to live a good life?” The project identified key priorities for Tasmanians, which has allowed TasCOSS to identify goals, targets and descriptors for engaging in policy development and advocacy.

¹¹ Community members, TasCOSS' A Good Life project consultations.

¹² According to the ABS, 52.5% of Tasmanians reported excellent or very good health, compared to 57.2% Australia-wide. ABS National Health Survey 2017-18, First Results, Table 2.3, age-standardised.

¹³ 22% of the population — nearly 130,000 Tasmanians — were recorded by the ABS as having two or more chronic conditions, compared with 18.7% Australia-wide. ABS National Health Survey 2017-18, First Results, Table 2.3, age-standardised.

¹⁴ For a range of risk factors, see <https://www.primaryhealthtas.com.au/wp-content/uploads/2022/04/Primary-Health-Tasmania-Needs-Assessment-2022-25.pdf>.

¹⁵ TasCOSS, 'Submission to Our Healthcare Future Consultation' (February 2021); TasCOSS, Submission to Joint Sessional Committee on Gender and Equality, 'Inquiry into Tasmanian Experiences of Gendered Bias in Healthcare' (April 2023).

disadvantaged communities experiencing worse health than others,¹⁶ and facing additional barriers to accessing health services as a result of multiple factors, including a lack of bulk-billing GPs, unaffordable prescription medication, a lack of dental, mental and allied health care services, and limited (or non-existent) services in rural and regional areas.

The above factors are compounded for many Tasmanians experiencing other forms of disadvantage or social exclusion, including Tasmanians with a disability, Aboriginal Tasmanians, younger and older Tasmanians, and people who live with stigma and discrimination (such as LGBTQIA+ Tasmanians).¹⁷ As we have outlined in previous Government submissions,¹⁸ healthcare reform initiatives must acknowledge and address both existing inequities in health outcomes and access (which includes maternal, reproductive and paediatric healthcare), as well as promoting equity in health outcomes and in access.

As many sexual and reproductive health services are accessed through GPs or mainstream health clinics, access to these services is extremely likely to be impacted by difficulties in accessing generalist health services. TasCOSS therefore strongly encourages the Committee to also consider overarching issues impacting access to comprehensive healthcare for Tasmanians when exploring issues relating to reproductive, maternal and paediatric health services. The following is a snapshot of some of the key issues we believe should be considered by the Committee when evaluating the intersection of the experience of disadvantage and access to appropriate, affordable health services.

Poverty/low income and health services

The current cost of living crisis is having a significant impact on a health system that was already struggling to cope with demand. This crisis is having an impact on a broad range of Australians, not just those on low incomes. However, although many Tasmanians are experiencing difficulties relating to the rising costs of essentials such as housing, food and healthcare, it is having the most significant impact on those who were already experiencing hardship.

Recent research highlights the significant impact ongoing poverty and financial insecurity is having on people's ability to look after their own health, as well as the health of their families.¹⁹ This has been reflected in our recent consultations with Tasmanians on low incomes across the state, who have told us they are currently forced to make difficult decisions to manage their health (and the health of their family members) during the current cost of living crisis. Participants shared stories about how they were cutting down on medications, avoiding visits to the GP or skipping specialist appointments, to try to save money for food and other essentials.

These issues in accessing general health services also have significant impacts on the ability of Tasmanians on low incomes to access appropriate and affordable reproductive, maternal and child health services. We therefore encourage the Committee to consider the impact of broader policy changes on health

¹⁶ TasCOSS 2019, Preventing Hospitalisations in Tasmania, 2020/21 Budget Priorities Statement; ABS National Health Survey 2017-18, First Results, Table 33.4.

¹⁷ Ibid, 12-18.

¹⁸ See for example, TasCOSS, 'Submission to Our Healthcare Future Consultation' (February 2021).

¹⁹ Brotherhood of St Laurence, Social Policy and Research Centre, 'Making Ends Meet: Fostering Security and Dignity in Tough Times' (2024).

outcomes for the purposes of this inquiry. This includes the need to enact policy changes such as raising the rate of Commonwealth income support payments, including Jobseeker and Rent Assistance, to ensure more equitable access to health services.

Young people

As outlined above, comprehensive pediatric and maternal health plays a crucial role in child and youth wellbeing. Young peoples' concerns about their physical and mental health were highlighted in the Government's engagement with young Tasmanians as part of the development of the Child and Youth Wellbeing Strategy,²⁰ which includes supporting the positive mental and physical health of children and young people as a key principle,²¹ and contains a broad understanding of what it means for children to be 'healthy', including health literacy, emotional support, and the ability to engage in outdoor activities and nature-based play.²² The Tasmanian Government has committed to strengthening services to promote child health and wellbeing, including the implementation of 'kids care clinics',²³ providing free allied health services (including speech pathologists, psychologists and social workers) in Child and Family Centres,²⁴ and implementing a youth peer worker model to support young Tasmanians experiencing difficulties with their mental health.

Despite the Government's commitments in these areas, health and social outcomes for Tasmanian children demonstrate there are still significant gaps in service delivery in the areas of physical and mental health. For example, the Youth Justice Blueprint acknowledges the lack of appropriate mental health services for young people²⁵ as well as the impact of this shortage on the health and wellbeing of young people.

LGBTQIA+ community and maternal, reproductive and sexual health

Recent reports have highlighted the comparatively high rates of health issues within the LGBTQIA+ community, both nationally²⁶ and within Tasmania,²⁷ with current local challenges including a lack of services generally (which in turn disproportionately impacts the LGBTQIA+ community), as well as a lack of inclusive healthcare services and/or providers.²⁸ Recent reports also show many LGBTQIA+ Tasmanians are avoiding accessing health services due to fears of experiencing stigma or discrimination,²⁹ and that this issue is particularly acute for the trans and gender diverse community.³⁰

Recent media articles, as well as academic reports, have highlighted the lack of specialist services in Tasmania and the impact this has on healthcare for LGBTQIA+ Tasmanians. A recent report outlining the experiences and views of the LGBTQIA+ community in Tasmania highlighted the need for a dedicated

²⁰ Tasmanian Government, 'It Takes a Tasmanian Village: Child and Youth Wellbeing Strategy' (August 2021).

²¹ Ibid, 12.

²² Ibid, 14.

²³ Ibid, 19.

²⁴ Ibid, 25.

²⁵ Department for Education, Children and Young People, 'Youth Justice Blueprint 2024-2032: Keeping children and young people out of the youth justice system' (December 2023), 17.

²⁶ Hill, A 2020, 'Private Lives 3: The health and wellbeing of LGBTIQ people in Australia,' Latrobe University, 46.

²⁷ Ibid, 29.

²⁸ Ibid, 29-32.

²⁹ Ibid, 37-38.

³⁰ Ibid, 39-41.

Gender Clinic in Tasmania in order to ensure access to appropriate and effective sexual and reproductive health services, including gender-affirming treatment and care.

Tasmanians with disability

The recent *Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability* ('the Disability Royal Commission') highlighted the significant ongoing issues faced by Australians with disability, including increased risk of sexual abuse, family violence and neglect. Although the Disability Royal Commission was a national enquiry, its findings have particular relevance for Tasmania given our comparatively high rates of disability per capita of population. Tasmania has the highest rate of disability in Australia, with data from 2018 indicating that 24,500 Tasmanians (or 5.8% of the state's population aged 0-64) had a profound or severe core activity limitation, with a further 31,100 people (or 7.4%) experiencing moderate or mild limitations.³¹

The Disability Royal Commission highlighted significant and specific issues experienced by people with disability in relation to sexual and reproductive health. For example, the Disability Royal Commission heard evidence in relation to the involuntary sterilisation of women and girls with disability, defined as 'an irreversible surgical procedure that permanently prevents reproduction, performed on a person without their full, free and informed consent'³² which includes situations in which, 'a person is pressured, induced or deceived to gain their consent for sterilisation, and they may not understand the full implications of sterilisation'.³³

According to the evidence heard at the Disability Royal Commission, this practice has been justified due to four key explanations:

- Concerns women with disability will produce children with disability;
- Concerns women or girls with disability are unable to manage menstruation;
- Concerns girls or women with disability are unlikely to have or develop the capacity to parent; and
- Concerns that women and girls with disability are particularly vulnerable to sexual abuse and unwanted pregnancy.

Alongside the recommendations of the Disability Royal Commission relating to involuntary sterilisation, the exploration of this issue highlights the need for a transition towards a rights-based approach to disability in general, including sexual and reproductive health care. We note this is an issue which is likely to be impacted by the full implementation of a supported decision-making regime (which we support),³⁴ and we reiterate the importance of comprehensive community and professional education in changing the attitudes, beliefs and practices underlying sexual and reproductive healthcare for Tasmanians with disability, and promote concepts such as a presumption of capacity. We also reiterate our support for a

³¹ Productivity Commission 2023, *Report on Government Services* 2023, Part F, Section 15, Table 15A.7.

³² Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability: Final Report, Volume 6: Enabling Autonomy and Access (September 2023), 5.

³³ Ibid.

³⁴ See, for example, TasCOSS, Submission to Department of Justice, 'Guardianship and Administration Amendment Bill' (November 2022).

Human Rights Act in Tasmania and highlight the role legislative instruments can play in assisting communities to recognise, understand, uphold and protect the rights of people experiencing vulnerability.³⁵

Rural Tasmanians

Living in a rural or remote area is an independent risk factor for poor health, with Tasmanians in rural areas facing additional challenges in accessing appropriate and affordable healthcare. Although there are current shortages of general practitioners across Tasmania, this issue is particularly acute in regional and remote areas. Whilst there is an increasing availability of telehealth services, those living in rural areas may also face additional barriers to accessing these services due to poor internet connectivity or limited digital literacy.³⁶

A recent submission from Women's Health Tasmania highlights significant issues for people accessing reproductive and maternal health services in rural Tasmania, including the following:

- Difficulties in accessing low-cost pregnancy terminations outside of metropolitan areas;
- Lack of coordination between services and difficulties in accessing specialist appointments;
- Lack of support services for mothers with young children; and
- Limited mental health initiatives.³⁷

To address current difficulties in accessing appropriate and affordable health services which could have particular impact for areas such as maternal and paediatric health, greater investment in community-specific, place-based initiatives is needed to ensure funding for initiatives, programs and services can be targeted to the needs of particular communities. Such initiatives would also utilise the expertise and existing relationships and networks of local community organisations and groups, and also provide ongoing opportunities for community involvement and engagement – a significant impact, given the isolation experienced by many women and parents following giving birth, and difficulties experienced by people living in remote communities in accessing support networks.³⁸ While we also support place-based initiatives in metropolitan areas, we believe they could have a significant impact in rural and remote communities, particularly given the existing struggles experienced in these communities in accessing mainstream services and supports.

As explored in our recent Budget Priorities Statement,³⁹ TasCOSS also strongly supports government investment in the development and implementation of outreach healthcare models, including mobile health hubs, to provide more comprehensive and accessible services to Tasmanians in rural and remote areas.

³⁵ Ibid; TasCOSS, Submission to the Tasmanian Government, 'Disability Inclusion Bill' (September 2023).

³⁶ Primary Health Tasmania, 'Health in Tasmania – Health Needs Assessment 2022-23 to 2023-24', 22.

³⁷ Women's Health Tasmania, 'Talking to Women in Rural and Remote Tasmania' (2019), 8-11.

³⁸ Caitlyn Gribbin, 'Rural and regional mothers experience a lack of support to breastfeed babies' ABC News (31 January 2024), accessed at <https://www.abc.net.au/news/2024-01-31/rural-and-regional-breastfeeding-difficulties/103233032>.

³⁹ TasCOSS, 'Supporting Tasmanians in a Worsening Cost of Living Crisis: 2024-2025 TasCOSS Budget Priorities Statement' (December 2023).

Conclusion

The ability of Tasmanians to access comprehensive and affordable reproductive, maternal and paediatric healthcare is impacted by several factors, including the area in which they live, their financial circumstances and whether they are experiencing disadvantage or belong to a community which may be marginalised from mainstream health services. We strongly encourage the Committee to consider the broad range of factors (including but not limited to those outlined above) when considering how to implement systems and initiatives to improve both access to health services and health outcomes.

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