

Queensland Women and Girls' Health Strategy 2032

Easy Read Book



Hard words



This book has some hard words.

Hard words are in **orange**.

Hard words and their meaning are on pages 29 to 39.

You can get help with this book.



You can get someone to help you

- read this book
- understand this book
- find more information.

We acknowledge First Nations people



Acknowledge means we include and understand the importance of **First Nations** people's

- culture
- language
- history
- connection with the land and sea.



First Nations people are unique peoples.

They are

- Aboriginal people and/or
- Torres Strait Islander people.

First Nations people are important.

We acknowledge the ideas and stories that **First Nations** women and girls gave us for this book.

About this book



This book is about the **Queensland Women and Girls' Health Strategy 2032**.

We will call it **the Strategy**.

Queensland Health wrote this book and the Strategy.

Queensland Health is part of the Queensland Government.

When you see the word “we” it means the Queensland Government.

The Strategy is about making things fair and supporting women and girls to be healthy.

This is called **health equity**.

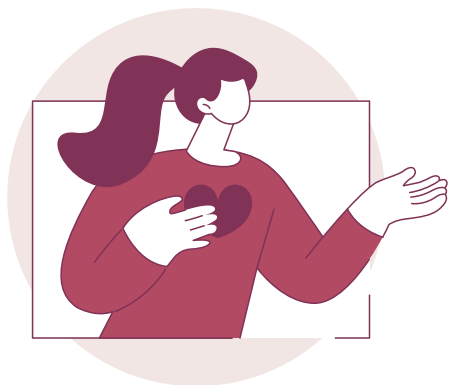


We used other books to help us write the Strategy

- the *Consultation Outcomes Report*
 - This book has a lot of words.
 - This book is about what women and girls told us the Strategy should be about.
- an *Evidence Review of Queensland Women and Girls Health*
 - This book has a lot of hard words.
 - It is about the health of women and girls.
 - It includes information from **research**.



In this book



The Strategy is about improving the health and wellbeing of women and girls.

This book will tell you

- who the Strategy is for
- why we need the Strategy
- who helped us make the Strategy.

This book tells you about the important parts of the Strategy



the aim



the **principles**



the **system reform goals**



the **priority health areas.**



This book also tells you about how we will work together to help women and girls to be healthier.

Who the Strategy is about



The Strategy is about all people who see themselves as a woman or girl.

It is also about people who may not see themselves as a woman or a man.



Some women and girls find it hard to get the health care they need.

It might be hard because of **barriers**.

Barriers are things like not having money to pay for a doctor's appointment or not having a car to get there.

Other barriers can be

- not feeling comfortable or safe when you visit a doctor or hospital
- not being able to understand what the doctor or nurse says
- not understanding written information.

Some women and girls may have more barriers to getting the health care they need.

Their health might not be as good as other people's health because of the barriers they face.

We refer to these women and girls as **priority communities**.





In our Strategy, **priority communities** are women and girls living in Queensland who



identify as **First Nations**



come from another country



use English as a second language



live with disability



identify as **LGBTIQ+**. This stands for lesbian, gay, bisexual, transgender, intersex and queer. The “+” shows that the letters do not cover everyone in this group



live in rural and remote places



might have been to prison or are in custody.



Women have many different backgrounds, experiences and lifestyles.

These women and girls

- are an important part of the community
- have shown strength
- need to be heard
- should feel safe
- should have the same chances as everyone else
- should have what they need to be healthy.

Why we need the Strategy



In Australia, women live longer than men.

Women and girls have many health issues.

These can look and feel different to men's health issues.

Australian women are more likely to experience

- **violence**
- poor **mental health**
- more hospital visits for reasons that could be prevented
- multiple **chronic health conditions.**



Women and girls need to receive **holistic care** from **health professionals.**

Being unhealthy or worried about their health can stop women and girls from doing the things they want to do – like work, learn or care for others.



Sometimes people have **gender stereotypes**.

These are fixed ideas about what women and girls should do and how they should live.

- Example: One gender should play with dolls and the other gender should play with trucks.

Sometimes people have an **unconscious gender bias**.

This is when people don't even know they have certain ideas about someone of a certain gender.

- Example: One gender is better than the other.

These biases can impact on how someone might make decisions.

Gender stereotypes and **gender bias** can exist in **health systems**.

This can affect the care that women and girls receive.



Many women and girls feel like no one is listening to them in our **health system**.

Women and girls have told us they have been **misdiagnosed** or dismissed.

We want to make sure everyone gets the best health care and support.

Who helped us make the Strategy



Many women and girls gave us their ideas for the Strategy.

We asked a lot of questions.

- Nearly 12,000 people completed our online surveys.
- There were 77 letters written to us.
- We spoke to a lot of **health professionals**.



We heard about

- good and bad health experiences that women and girls have had
- what women and girls want and need to be healthy
- how the health system can be better.



What we heard is important.

We looked at a lot of information including

- what women and girls have told us
- things that other governments have done to improve the health of women and girls
- numbers and research about women and girls' **health concerns**.

The important parts of the Strategy



The aim

The **aim** is what the Strategy will achieve.

The Strategy aims for all women and girls to be well and healthy at all ages so they can play, learn, work.



The principles

There are **principles** that guide our Strategy.

Principles are what we believe and work by.

Our principles are



Human rights



Women and girls' voices



First Nations health and healing



A **life course approach**



Determinants of health



Co-design



Clinical and cultural safety



Health equity.



Health system goals

We have goals to improve the whole **health system**.

Our goals are to

- improve the health of **priority communities**
- increase access to **prevention** and **early intervention** health care
- improve women and girls' **health literacy**.

We also want to make sure women and girls can

- access health care
- have their health issues understood by health workers.

Our other **goals** are

- for services to connect with each other
- for health workers to be supported to learn more about women and girls' health issues
- to increase **research** into women and girls' health.

Priority health areas



There are health issues that have a big effect on women and girls.

We will call these **priority health areas**.

Each **priority health area** has a goal and strategies.

- The **goal** is what we want to achieve.
- The **strategies** are how we are going to achieve it.

The 6 priority health areas are



Healthy lifestyles and bodies



Sexual and **reproductive health**



Mental health and wellbeing



Health response to **domestic and family violence**, and **sexual violence**



Maternal health



Chronic health conditions and cancer.



Healthy lifestyles and bodies

Women and girls told us they want

- access to
 - free or low-cost sport
 - safe places to exercise
 - healthy foods.
- more information and advice about
 - how to be healthy
 - health conditions
 - how to prevent being unhealthy.

Women and girls also told us they want good health care experiences without **stigma**.

Women and girls want **health professionals** to

- believe them
- not dismiss them.



Key health issues that affect women and girls are

- high alcohol intake
- not enough exercise
- smoking
- high body weight
- worrying about what **health professionals** will think and say about their body weight.

Our goal is for Queensland women and girls to be supported to have a healthy lifestyle.



Our **strategies** are to

- give early advice to women and girls about what they can do to be healthy and feel good
- increase exercise
- support health care services to make women and girls feel accepted and comfortable
- help women and girls to understand their health
- increase access to healthy food options and information.



Sexual and reproductive health

Women and girls told us they want

- better access to
 - **termination of pregnancy** care
 - low-cost **contraception.**
- **health professionals** that are more
 - **gender-informed**
 - **culturally competent**
- aware of challenges that women and girls with disability face.



Women and girls also want more health information

- early
- about **LGBTIQ+** advice and relationships
- in schools
- and support for **perimenopause** and **menopause.**



Key health issues that affect women and girls are

- **sexually transmitted infections**
- **endometriosis**
- **polycystic ovary syndrome**
- women who need medical help to get pregnant
- **perimenopause** and **menopause.**

Our goal is for women and girls to have good **reproductive** and sexual health at all ages.



Our strategies are to

- increase access to **termination of pregnancy** care
- provide information about **endometriosis** and pelvic pain
- support women experiencing **perimenopause** and **menopause**
- support women through **assisted reproductive technology**
- give sexual and **reproductive health** education and services
- address **period poverty.**



Mental health and wellbeing

Women and girls told us they want **mental health** care that

- is safe
- is **trauma-informed**
- addresses the barriers that **priority communities** face.

Women and girls also want **counsellors** to be available before 9 am and after 5 pm.

They want to feel heard.

Women and girls want access to **mental health** care for support with

- **violence**
- **perinatal** health
- **termination of pregnancy.**

They also want better access to

- **mental health** care in schools
- **mental health** screening before and after pregnancy.



Key health issues that affect women and girls are

- poor **mental health**
- **depression** and **anxiety**
- **suicide**
- **eating disorders.**

Our goal is for women and girls to have better **mental health** and wellbeing.



Our strategies are to

- increase early access to increased **mental health** and wellbeing support
- help **mental health** workers to develop the skills they need to help women and girls
- make it easier for women and girls to get help
- give women and girls more options to get **mental health** help.



Health response to domestic and family violence, and sexual violence

Women and girls told us they want

- better access to support for those affected by **violence**
- access to help no matter where they live
- more information and education about **violence**
- support after **violence**
- **health systems** to better work together.



Violence can happen at any time.

It can have long term impacts on your health.

Some women and girls are at higher risk of **violence** if they are

- young
- identify as **First Nations**.

Sexual violence is most common in young women.

Violence can impact women and girls' ability to live well and work.

Pregnancy and birth are times of high risk for victims of **violence**.

Our goal is for women and girls experiencing **violence** to have access to sensitive, **trauma-informed** and **culturally safe** health care.



Our strategies are to

- have more **health professionals** that know how to care for people who have experienced **violence**
- increase **health professionals'** knowledge and skills
- make sure services work together to provide the best care for women and girls who have experienced **violence**
- help women and girls to have access to the right care at the right time.



Maternal health

Women and girls told us they want equal access to

- good **maternal** care
- **Birthing on Country** programs
- longer-term support after birth.

Women and girls also want

- improved **continuity of care**
- more health information
- more options for where women can give birth closer to home.



Key health issues that affect women and girls are

- birth complications, particularly for women who live far away from cities
- **perinatal depression**
- smoking during pregnancy
- **maternal obesity**
- high rates of people under 20 years of age giving birth.

Our goal is for mothers and babies to be healthy and cared for close to home and community.



Our strategies are to

- increase birthing options and care closer to home
- provide appropriate care before, during and after pregnancy
- provide **perinatal mental health** checks and supports
- improve continuity of **maternal** care in hospitals, in the community or at home.



Chronic health conditions and cancer

Women and girls told us they want

- help to manage their health
- more education for **health professionals** about women's health issues
- more support when they are older.



Key health issues that affect women and girls are

- lung conditions
- **endometriosis**
- pelvic pain
- back pain
- **dementia**
- **stroke**
- heart disease
- cancers.

Our goal is for women and girls to live longer, healthier lives and be supported to prevent and manage **chronic health conditions**.



Our strategies are to

- improve **cardiovascular** health
- better understand and prevent back pain
- improve support, diagnosis and treatment for pelvic pain and **endometriosis**
- provide better information about cancer
- provide improved treatment access for women and girls with cancer
- help women and girls to be healthy as they get older
- support women who have or might develop **chronic health conditions** one day.

How we will work together to help women and girls to be healthier



We need to help women and girls to be healthy throughout their lives.

We can do this by working together.

We need many people to work well together including

- governments
- organisations and services that provide care
- communities
- individuals.



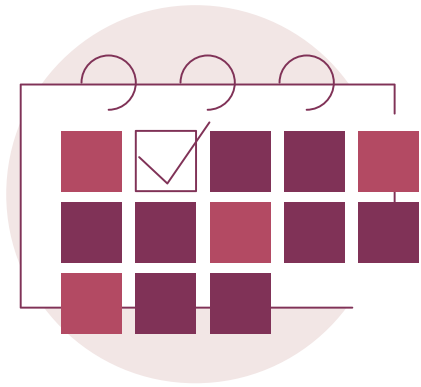
We have come up with activities to help women and girls.

These are in the [Investment Plan – Easy Read Book](#).

To do these activities we will

- work together to design new actions to help women and girls to be healthier
- tell you about how the Strategy and actions are going.

How will we know the Strategy is working?



We will make sure the Strategy stays on track.

We will do this through an **evaluation framework**.



This will help us to achieve

- improved health and wellbeing
- improved **health literacy**
- improved information to help make decisions about your health
- more access to health care
- improved skills and knowledge of health care workers
- support for things that affect your health.

We want the Strategy to improve the health of women and girls in Queensland.

More information



You can ask someone to help you to read this book.

You can ask a friend, family member or carer.



You can also contact us.

Email

womenshealthstrategy@health.qld.gov.au

Website

[Click here](#)

or

www.health.qld.gov.au/womens-health-strategy

Letter

Queensland Health
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Hard words glossary

Hard words are listed in the order of the alphabet.



A

Acknowledge

To include and understand the importance of something.

Anxiety

A feeling of being worried, uneasy or fearful.

Assisted reproductive technology

Medical help to assist women when they are having difficulty with producing babies.



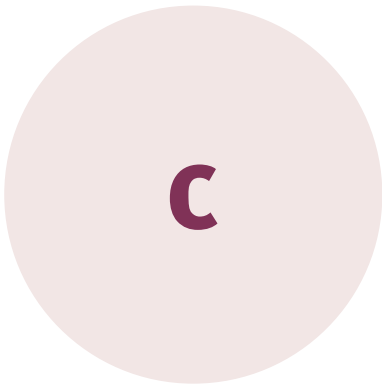
B

Barriers

Barriers to health are things that make it hard for someone to get the care they need.

Birthing on Country

Helpful programs for First Nations women who are giving birth. The programs help First Nations women to connect with their culture.



Cardiovascular

To do with the health of your heart and vessels that carry blood around your body.

Chronic health conditions

Health problems that have lasted more than six months.

Clinical and cultural safety

Clinical safety is keeping patients safe when receiving health care.

Cultural safety is creating a respectful and safe environment for people from different cultures, for example First Nations peoples.

Co-design

To work together with a lot of people to think about how something is made. Everyone is treated equally and contributes to the creative process.

Continuity of care

Good quality care over time.

Contraception

Ways to prevent getting pregnant.

Counsellors

A person trained to give advice to people experiencing personal problems.

Culturally competent

Understanding and respecting the values, attitudes and beliefs of people's culture.



D

Dementia

A general term for loss of memory or thinking abilities severe enough to affect daily living.

Depression

Being sad all the time so much that it stops you from doing things throughout the day.

Determinants

Things that can affect people's health. For example, social determinants are things in people's lives like the place where they live, their education, their job and family life.

Domestic violence and family violence

When someone uses violence or threats to have power over someone they're close to. This happens at home. It could be towards a partner or children and can make them feel scared and unsafe.



E

Early intervention

Treating a problem before it gets worse.

Eating disorder

A serious mental health condition with unhealthy thoughts and behaviours to do with eating, exercise or body shape.

Endometriosis

A disease where tissue grows outside of a woman's organ (the uterus), which can cause really bad pain and make it harder for women to get pregnant.

Evaluation framework

A document that helps to understand whether something is working well.



F

First Nations

People who identify as Aboriginal people and/or Torres Strait Islander people.



G

Gender-informed

To consider how people's needs are influenced by their gender.

Gender stereotypes

Fixed ideas about what women and girls should do and how they should live.



H

Health concerns

Things that women and girls think about their mind and body that could improve or are not working well.

Health equity

When everyone has the chance to be as healthy as they can be.

Health literacy

Knowing how to access, understand and use health information in ways that benefit your health.

Health professional

A person who works in health care, like a doctor, nurse or allied health professional.



H

Health system

A group of services that look after your health that are provided

- in a hospital
- in your community
- in your home
- by your doctor.

Holistic care

Treating a whole person, not just their symptoms. This means also thinking about their mind, body and family.

Human rights

The overarching set of rules for all humans so everyone is treated equally and fairly.



L

LGBTIQ+

A short way of saying the words people use to talk about their sexual orientation, gender and sex.

It stands for lesbian, gay, bisexual, transgender, intersex and queer. The “+” shows that the letters do not cover everyone in this group.

Life course approach

Women and girls of all ages and considering that health needs change as people grow older.



M

Maternal health

The health of women during pregnancy, childbirth and after giving birth.

Maternal obesity

Being overweight during pregnancy or after giving birth to a baby.

Menopause

A natural process that happens in women's bodies. Menopause is the end of a woman's monthly period.

Mental health

Mental health is about how a person thinks and feels. A mental health problem is when feelings start to bother someone, or when they do not feel in control of their feelings.

Misdiagnosed

When a person is told they have a certain sickness, when in fact they have a different one.



P

Perimenopause and menopause

Natural processes that happen in women's bodies. They are the lead up (perimenopause) and end (menopause) of a woman's monthly period. Women may notice changes to their body during this time.

Perinatal

The time from the start of pregnancy up to a year after someone gives birth to a baby.



Perinatal depression

Being sad after giving birth because of changes in hormones.

Period poverty

A lack of access to hygiene products like pads and tampons. This is usually because they are not accessible or cost a lot of money, which some women and girls cannot afford.

Polycystic ovary syndrome

When women's reproductive organs (ovaries) produce higher-than-normal amounts of male hormones.

Prevention

Stopping a problem from happening.

Principles

Things that we believe and work by.

Priority communities

Women and girls with diverse backgrounds and experiences. Their health might not be as good as other people because of the barriers they face.

Priority health areas

Topics of related health issues that commonly or only affect women and girls.



Q

Queensland Women and Girls' Health Strategy 2032

A book written by the Queensland Government about women and girls' health and what Government will do to improve women and girls' health and wellbeing into the future.



R

Reproductive health

The physical and mental wellbeing of a person that is linked to the organs that are involved in being able to have babies.

Research

Careful study of information about a topic.



S

Sexually transmitted infections

Infections that are passed from one person to another person through unprotected sexual contact.

Sexual violence

Any act of a sexual nature or touching that a person did not consent to.

Stigma

Negative or unfair thoughts about something.



S

Stroke

When something blocks blood supply to part of the brain or when a blood vessel in the brain bursts.

Suicide

An act of ending your own life. People sometimes do this because they have negative thoughts or want to escape pain or suffering.

System reform goals

Things that we will work towards to improve health care.



T

Termination of pregnancy

A medical procedure to end a pregnancy, so it does not result in the birth of a baby.

Trauma-informed

Understanding how people's bad experiences can impact on their lives and needs.



U

Unconscious gender biases

When people don't even know they have certain ideas about someone of a certain gender.



V

Violence

Actions or words that are intended to hurt people.



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