

women's health

update

UN committee expresses concern about the status of women in New Zealand

The United Nation's committee responsible for the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) reviewed the New Zealand government's progress in meeting its obligations under the treaty in New York in July. Two representatives of Women's Health Action joined the delegation of New Zealand non-governmental organisations (NGOs) who reported to the Committee. The Committee has just released its concluding observations following New Zealand's review and has made a large number of recommendations to the New Zealand government on actions that are required to address discrimination and advance the status of women in New Zealand. George Parker, Women's Health Action's Senior Policy Analyst, reviews the Committee's concluding comments and discusses where to next in terms of using CEDAW to help advance women's status in Aotearoa New Zealand.

CEDAW periodic reviews

CEDAW is an international treaty and rights based framework which was adopted in 1979 as one of the six primary international documents for the protection and promotion of human rights. New Zealand ratified the convention in 1985. Governments of countries that have ratified CEDAW are obliged to submit periodic reports (4 – 5 yearly) to the CEDAW monitoring committee, outlining their progress in meeting their obligations under the convention. In tandem to government reporting, non-governmental organisations prepare alternative or shadow reports to help strengthen the monitoring committee's capacity to draw accountability from the government. The CEDAW monitoring Committee considered New Zealand's 7th periodic reports along with reports from a number of other countries including Mexico, Samoa, and the Bahamas when they met for



CEDAW NGO representatives from NZ, Samoa and Bahamas with IWRAP Asia Pacific trainers

their 52nd session in July in New York. The New Zealand government delegation to New York was led by Minister of Women's Affairs Hon Jo Goodhew along with officials from the Ministry of Women's Affairs.

A group of representatives from non-governmental organisations also travelled to New York to meet with the committee including a representative from the National Council of Women, and representatives from Pacific Women's Watch (NZ) and its partner organisations Women's Health Action and Shakti Community Council. Maori Women's Welfare League were also hoping to send representatives but were unable to due to unforeseen circumstances. The Human Rights Commission was also represented by Dr Judy McGregor and a staff member. The opportunity to join the NGO delegation was an excellent opportunity for WHA's Director and Senior Policy Analyst to see international human rights processes in action and gain invaluable experience in how to progress the status of women in New Zealand through the use of human rights instruments such as CEDAW. While in New York, NGO representatives also had the opportunity to participate in training run by International Women's Rights Action Watch (IWRAP) Asia

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Pacific to help us best utilise the CEDAW process to progress our issues of concern.

CEDAW concluding observations

The CEDAW Committee's 7th periodic review of New Zealand has been concluded with the release of the Committee's concluding observations on New Zealand's progress in implementing the convention. The concluding observations provide something of a roadmap of actions required by the state to ensure progress in eliminating discrimination against women. The Committee's concluding observations from this periodic report commend the government on several areas but also include a large number of areas of concern and associated recommendations. Areas of commendation included the Employment Relations (Breaks, Infant Feeding, and Other Matters) Amendment Act of 2008 which provided support for and promotion of breastfeeding in the workplace, and the National Screening Unit's social

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Women's Health Update features women's health news, policy and scientific findings, to enable health care professionals and community-based workers to be at the forefront in women's health.

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marketing campaign launched in 2007 aimed at encouraging women to screen themselves for cervical cancer, which has increased participation rates across all groups of women.

However, the Committee also highlighted a number of areas of concern along with recommendations for how they be addressed. Of principle concern to the Committee was the lack of progress made on areas of concern outlined in the previous concluding observations following New Zealand's sixth periodic report. The Committee has again emphasised the responsibility of the government to give the Committee's concluding observations priority attention and to distribute the concluding observations to all relevant ministries, to Parliament, and to the judiciary. The Committee considered the priority areas for attention as including: the shift to gender neutral language and focus with respect to gender based violence, including domestic violence; pay inequality and pay equity; the status of vulnerable groups of women including women with disabilities and minority women; the impact of the 2011 earthquake on women; the impact of policy changes such as the financial cuts in legal aid schemes which stand to hamper women's access to justice; the adequacy of targets and benchmarks to advance women's rights; and the insufficient dissemination and promotion of the Convention.

The Committee expressed its concern that gender is not being mainstreamed into all national plans and government institutions as was recommended in the previous concluding comments, and noted with concern the lack of an new action plan for women and the

under resourcing of the Ministry of Women's Affairs. In regards to violence against women and women's access to justice, the Committee expressed deep concern about the tightened funding and proposed eligibility criteria for legal aid, given that women are overrepresented as users of legal aid. It also noted the failure to implement many of the recommendations in the report of the Task Force for Action on Sexual Violence, and the disinvestment in the Taskforce for Action on Violence within Families demonstrated by the lower level of representation among its members from chief executives to low-level officials.

Women's Health Action was pleased to see some important issues raised by the Committee related to health and women's sexual and reproductive rights. The Committee has recommended that the government ensure that ongoing welfare reforms do not discriminate against disadvantaged groups of women and that an independent evaluation of their gendered impact is made. The lack of gender impact assessment in welfare reform has been a key concern of Women's Health Action to date. The Committee also raised concerns about the current state of New Zealand's laws governing abortion and recommended that abortion law be reviewed with the view to simplifying it and ensuring women's autonomy to choose. The Committee also urged the wide promotion of education on sexual and reproductive health rights; the need to ensure informed consent in testing pregnant women for HIV; and efforts to improve access and quality of health services, including mental health care for minority women, especially Maori and Pacific

women, as well as for women with disabilities, lesbian women, and transgendered persons.

Where to next?

The CEDAW Committee's concluding observations are a call to action for the New Zealand government to address discrimination against women. They also provide non-governmental organisations and communities with a tool for urging action by the Government on issues of concern. To some extent the Committee's comments will be as effective as we make them. Pacific Women's Watch (New Zealand) PWW(NZ) will be holding two Auckland events as a follow up to New Zealand's periodic reporting to CEDAW and to map the next steps. The first, a CEDAW Report-back session "Process and Outcomes" will be held on Wednesday 26th September at 7pm in the Chapel at St David's Church Centre. We will hear how a country's 'Week with CEDAW' is structured and how NGOs are offered preliminary training in New York to become an integral part of the proceedings. There will also be a half-day gathering to follow on from the 'Report-back' to help transform the Committee's observations into practical activities with positive outcomes for women in New Zealand. This will be held on Saturday, 17 November, 9am - 1pm at Western Springs Garden Community Hall, 956 Gt North Rd, Western Springs. For more information email: info@pacificwomenswatch.org.nz or phone: (09) 418 0700.

Copies of the CEDAW Committee's Concluding Comments and information about other CEDAW follow up events can be obtained from www.womens-health.org.nz.

New research identifies gender differences in financial barriers to primary health care in New Zealand

A new study published in the *Journal of Primary Health Care*¹ has found that women are much more likely than men to report cost as a barrier to primary health care in New Zealand. The large scale study, which used data from SoFIE-Health, an add-on to the Statistics New Zealand-led Survey of Family, Income and Employment, found that gender was significantly associated with reporting financial obstacles to accessing primary health care including general practitioners, dental care and prescription drugs, regardless of individual deprivation or income levels.

The association between gender and deferral of primary health care has been

demonstrated internationally with studies showing that women not only have lower access to resources to pay out-of-pocket costs for medication and other health care services, but also often deal with greater demands placed on their time, especially for those who combine employment with domestic responsibilities. Studies have also observed that women are more likely to face non-financial barriers to accessing primary health care including inconvenient location, non-availability of a female GP, family/child care responsibilities, transportation problems, or lack of other resources to seek care (eg. availability of a child care facility).

The present study only asked about financial barriers and while they were greater for women than men, regardless of income,

the reasons for this require more investigation. The findings do however demonstrate the importance of a consideration of gender in order to address inequalities in access to primary health care. The findings are of concern as delayed care has negative repercussions for women's health as well as the health of others, because women are most often responsible for providing care to family members and friends. The study authors suggest that 'one strategy to improve access would be to provide primary health care free or to make co-payments sufficiently low that people are able to seek timely primary health care unimpeded by cost barriers. If cost barriers are not overcome, many-particularly women-will remain at risk of receiving less timely and appropriate preventative and other health services'.

1 Jatrana, S. Crampton, P. 2012. 'Gender differences in financial barriers to primary health care in New Zealand', *Journal of Primary Health Care*, Vol 4, No 2 (pp. 113-122).

Big Latch On 2012: Another BIG success!

Women's Health Action celebrated this year's World Breastfeeding Week by holding another hugely successful Big Latch On in over 130 venues across New Zealand. New Zealand again broke the record for the most breastfeeding children at one time with a total of 1571 latch ons counted at 10.30am on Friday 3rd August, up from last year's record of 1564. This year also saw the Big Latch On go global with an awesome 8862 breastfeeding children in 626 locations across 23 countries. The theme for this year's Big Latch On was: Promoting, Protecting and Supporting Breastfeeding Me hoki whakamuri, kia anga whakamua - To plan for the future we must understand the past. The event, which turned eight this year, has continued to grow steadily with increasing involvement and support from communities large and small around New Zealand. The Big Latch On helps communities come together and show the support available for women who breastfeed. The positive impacts extend past the event itself prompting the establishment of breastfeeding support groups in areas where families have been isolated. There will be a full report of this year's Big Latch On in our next Women's Health Update.



Women's Suffrage Breakfast 2012: 'Getting health off the scales: Moving women's health beyond weight obsessed culture'

Women's Health Action is delighted to announce Dr Cat Pausé as this year's annual Women's Suffrage Breakfast speaker. Dr Cat Pausé is a Human Development Lecturer & Fat Studies Researcher at Massey University. Her work has been published in a number of journals and she is currently co-editing *Queer(y)ing Fat Embodiment* for Ashgate Publications. She has appeared on 'Close Up', 'Breakfast' and '20/20', discussing her research and activism. Cat also maintains a presence in the Fatosphere with her blog, Tumblr, & podcast, 'Friend of Marilyn'. Dr Cat Pausé will challenge us to toss out those scales - we will no longer accept weight as a proxy for our health or our worth! She will consider the impact of our weight obsessed culture on the physical and mental health of women and girls, and propose new ways of moving forward as we advocate for health without encouraging body shame and hatred.



The breakfast will be held on Wednesday, September 19th from 7am – 9am at the Parnell Trust Jubilee Building, 545 Parnell Road, Auckland. Tickets cost \$30 each or \$280 for a table of ten. Please register by September 17th by emailing info@womens-health.org.nz or calling (09) 520-5295. This year's venue has a capacity of 120 so get in quick to secure your tickets to this fun and informative event.

Fat Studies Reflective Intersections Conference, Massey University

New Zealand's first Fat Studies conference was held at Massey University's Wellington campus on the 12th and 13th of July organised by Massey lecturer in human development and this year's Women's Suffrage Breakfast presenter Dr Cat Pausé. Fat Studies is an interdisciplinary field that challenges existing assumptions about fatness and fat people and the belief that weight and health are synonymous. Dr Pausé, in describing the focus of Fat Studies says 'scholars unpack and critique negative assumptions while looking at the impact on fat people's lives, challenge "fat stigma" and push for social justice'. Speakers at the conference included Dr Samantha Murray from Macquarie University who presented on her experience of weight loss surgery; Professor Robyn Longhurst from University of Waikato; and Dr Andrew Dickson from Massey University who challenged the idea that fat people can't also be athletes.

WHA Senior Policy Analyst George Parker attended the conference and presented the findings of research recently completed by WHA which examined the growing focus in the health sector and news media on the impacts of women's body weight on reproductive health outcomes. Our research casts a critical lens over the contemporary medical science and news media construction of 'maternal obesity'

as a 'health crisis' with the goal of opening up spaces for discussion and debate. We found the current state of medical science knowledge about 'maternal obesity' to be tentative, partial and incomplete, yet projected in the popular media, and accepted by the health sector, as complete and unquestionable. The power of this can be seen in reproductive health and maternity care with the shift towards a focus on weight management and intensive medical monitoring of larger women.

Our research contains a set of recommendations including the need for more research that focuses on the lived experience of larger women during pregnancy, and the breadth of social, cultural, political and structural factors that influence maternity outcomes for women classified as 'obese'.

A copy of WHA's 'Maternal Obesity – Research Investigation' can be downloaded from www.womens-health.org.nz.

Videos of all panels, papers, and the keynote address from the Fat Studies Reflective Intersections Conference are available for those registered as on-line delegates. Registrations are still open. See http://www.massey.ac.nz/massey/learning/colleges/college_education/about/conferences/fs2012/registration.cfm for more information.

Experiences of refugee women as sole supporters of families examined in new report

On Saturday August 4th, a report 'Doing it for ourselves and our children: Refugee women in their own in New Zealand' was launched. The report, prepared by Ruth DeSouza, explores the experiences of Refugee women as sole supporters of families. The project was jointly undertaken by Auckland University of Technology and Refugee Services New Zealand with the support, guidance and practical assistance of the three Strengthening Refugee Voices groups in Auckland, Wellington and Christchurch. The purpose of this project was to examine the resettlement experiences of women who entered New Zealand through the category of Women at Risk (identified by the Office of the United Nations High Commissioner for Refugees, UNHCR). This category constitutes up to 75 places (10%) of New Zealand's annual

refugee quota of 750 applicants. The project also included women who became sole heads of households as a consequence of their resettlement experiences.

A focus on the strengths and principles of social justice, community development and capacity building were central to this investigation. Specifically, the project had a transformative agenda, which was to enhance the wellbeing of refugee women by focussing on the roots of inequality in the structures and processes of society rather than in personal or community pathology (Ledwith, 2011). Within this frame, the project was committed to constructing refugee women as assets rather than deploying and replicating deficit models where refugee women are represented

as burdens for the receiving society (Butler, 2005). Recommendations of the report for the health sector include:

- Increased support around the navigation and understanding of health services in the community.
- Train and employ a more ethnically, religiously, and linguistically diverse health workforce at all levels.
- Develop culturally responsive services.
- Examine the affordability of services.
- Develop the cultural competence of staff working in health services

The report can be accessed from: http://www.refugeeservices.org.nz/resources_and_links/research_papers

Noticeboard

CERVICAL SCREENING AWARENESS MONTH

September is Cervical Screening Awareness Month – a great reminder to join the National Cervical Screening Programme or to have a cervical smear if it's due or overdue. www.cervicalscreening.govt.nz

WOMEN'S HEALTH ACTION CARTWRIGHT SEMINAR

September 7, Auckland
www.womens-health.org.nz

MIDDLE EASTERN WORKSHOP

September 11
Auckland

Building mainstream services' understanding and responsiveness to family violence within Middle Eastern communities.

Contact ann@waves.org.nz

AUCKLAND WOMEN'S CENTRE FUNDRAISER: SING FOR YOUR SUPPER

September 15
Auckland

Good company, great performers, world's best MC and a yummy dinner at the Grey Lynn Community Centre.
Email info@womens.org.nz or call 09 376 3227

BUILDING A NEW LIFE AFTER SEPARATION

September 15

Coping skills to help you reclaim yourself and begin to rebuild your life.

Email info@womens.org.nz or call 09 376 3227

PLAIN PACKAGING AND OTHER TOBACCO CONTROL POLICIES FROM AUSTRALIA

September 19
Wellington

Keynote speaker, Professor Melanie Wakefield, is an internationally renowned tobacco control expert, and has had a key role in designing and overseeing the Australian research into plain packaging.

<http://aspire2025.org.nz/2012/07/24/seminar-plain-packaging/>

WOMEN'S HEALTH ACTION SUFFRAGE BREAKFAST

September 19
www.womens-health.org.nz

APAC FORUM ON QUALITY IMPROVEMENT IN HEALTH CARE

September 19-21
Auckland

Discuss new ideas on how to enhance value, safety, and integration in the changing landscape of health care. Share methods, stories, and successes with health care leaders from around the world and learn how to "better your best."

<http://www.ihl.org/offering/Conferences/APACForum2012/Pages/default.aspx>

2012 SSPA CONFERENCE: IMPROVING OUTCOMES FOR CHILDREN AND WHANAU

September 20-21
Wellington

<http://www.sspa.org.nz/news/2012-sspa-conference>

JUSTSPEAK CAMP

September 21-23
Wellington

JustSpeak is going to be holding its first ever camp this September! It will be a unique camp by and for people interested in justice issues.

<http://justspeakcamp.weebly.com/>

SUICIDE PREVENTION CONFERENCE

September 28
Auckland

Learn about suicide prevention strategies and initiatives in NZ and hear from a world leader in suicide prevention.
<http://suicideprevention2012.weebly.com/program.html>

MENTAL HEALTH AWARENESS WEEK

October 8-14

This year's theme is 'Take Notice'
<http://www.mentalhealth.org.nz>

HDC MEDICO-LEGAL CONFERENCE 2012

Auckland - 17 October
Wellington - 18 October

Hear from some of New Zealand's leading medico-legal experts on the latest developments in health and disability law.

<http://www.hdc.org.nz/education/hdc-medico-legal-conference-2012>

ARA TAIHOI WĀNANGA AND AGM: IDENTITY, BELONGING AND WELLNESS

October 24-25

Island Bay, Wellington

<http://www.arataiohi.org.nz/node/117>

WOMEN'S REFUGEE CONFERENCE WHĀNAU OF TOMORROW BUILDING SAFER FUTURES

26-27 October

Blenheim

Community, Government and social sector leaders will come together to discuss the challenges and possibilities for a safe, violence-free country.

<https://womensrefugee.org.nz/WR/conferences/conference%202012.htm>

20TH HOSPICE NEW ZEALAND PALLIATIVE CARE CONFERENCE

November 14-16

Auckland

Community, choice and collaboration are the cornerstones and overall theme of the conference. It will challenge your thoughts and inspire you in your work caring for people with a life limiting condition.

<http://www.rnzcgp.org.nz/events/details/209>

GENDER MATTERS: DETERMINING WOMEN'S HEALTH

May 7-10, 2013

Sydney

The conference will continue Australia's focus on showcasing cutting edge research and best practice approaches in women's health policy and practice locally, across Australia and internationally.

<http://www.womenshealth2013.org.au/>



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Breastfeeding Friendly Workplaces - www.bfw.org.nz

MINISTRY OF
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