

Women's Report Card

Measuring Women's Progress



Department for
Community Development
Office for Women's Policy

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This publication has been prepared by the Office for Women's Policy to provide statistical information on women in Western Australia. The information contained herein is derived from sources believed to be reliable and accurate at the time of publishing. It is provided solely on the basis that readers will be responsible for making their own assessment and for verifying all relevant representations, statements and information.

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Minister's Message

The Western Australian Government is committed to ensuring the needs and interests of women are acknowledged and addressed. As Minister for Women's Interests, I am dedicated to listening to the views of women and striving to ensure they are represented in decision making and policy development.

This community engagement approach to policy development first began with the highly successful Women's Convention in 2002 and continued with community engagement forums in 2003. In total, more than 1,000 women have contributed their views, ideas and aspirations around seven key areas.

The next important step is to measure the progress of women against goals in the seven theme areas identified at the Women's Convention. The Women's Report Card provides a series of indicators, each measuring an aspect of women's lives in Western Australia. The indicators were developed by the Office for Women's Policy in conjunction with the Women's Advisory Council, and the women of Western Australia.

The indicators will be regularly updated and published, providing an ongoing measurement of key issues for women across the state. The Report will be distributed widely every International Women's Day to ensure the community, business and government are aware of these important matters.

The process of developing the Report Card has been a valuable exercise in itself, revealing gaps in the data currently available. Work is already underway to address

these gaps, such as better collaboration of government agencies to improve information on domestic violence. It is anticipated more indicators will be added as new sources of information become available.

It is important to note also that issues and circumstances for Western Australian women vary widely and cannot be summarised in a single set of indicators. Unique needs and issues face the many communities that make up the diverse Western Australian society. Future publications are planned which will focus on indicators for groups such as Indigenous women and women from culturally and linguistically diverse communities.

"If it is not measured, it doesn't count" is an accurate observation for many areas of public life, and the Women's Report Card provides valuable information for all those in the community with an interest in current issues for Western Australian women.

**Minister for Women's Interests,
Sheila M'Hale**

Foreword

The Women's Advisory Council welcomes the publication of the Women's Report Card and is pleased to have played a role in shaping the report.

The Report promises much for the women of Western Australia. It gives us an idea of where we are now and enables us to measure where we go in the future. This Report and the reports that will follow in years to come will be a useful tool, not only for governments, but the wider community. It will help determine with more clarity whether certain policies or programs are working to advance women in our State. It will also allow us to see gaps in our approach to ensuring a safe and equal place for women in our community.

The most significant gap in the Report Card is due to the lack of comparable data for Indigenous women. This is a concern for the Women's Advisory Council as we are conscious of the difficulties faced by Indigenous women and the fact that much of the data for the broader community does not reflect the reality of Indigenous women's lives. We look forward to a complementary report focusing on Indigenous women.

The lack of regularly published data on family and domestic violence is also a concern for the Council. The current collaboration of government agencies to address the need for information on family and domestic violence is a welcome response.

The Women's Advisory Council believes the Report Card is an excellent initiative from government and is proud to have been involved in its development. We look forward to future reports building on the valuable information already assembled.

Arina Aoina
Chair
Women's Advisory Council

Introduction

I am delighted to introduce the first Women's Report Card in Western Australia.

This Report gives key indicators of the status of women in specific areas of public life and participation. It gives an overview of women's participation in employment, and their representation in Parliament, boards and senior management in the public and private sectors. Importantly, it includes indicators that suggest that women have yet to feel safe and secure in both the private and public spheres of their lives. As an overview of the experiences of women, the Report Card provides government, business and the community with a snapshot of Western Australian women's visions and goals.

I intend to use the first Report as a baseline for tracking progress on the goals nominated by women who participated in the Women's Convention and community forums held in 2002 and 2003. Such an approach ensures that there will be a continuous direct link between community engagement processes for women and production of the Women's Report Card in Western Australia.

Of course a myriad of factors determine women's lives: race, ethnicity, ability, sexual orientation, socioeconomic status, geographic location, religion, educational attainment, family resources, cultural and linguistic background are some of the factors that intersect, influence and shape women's lives and aspirations.

The trends outlined in the Report are indicative of the range of women's experiences and provide a useful tool for government, non government and the business sectors to respond to challenges in many areas of policy and service delivery.

I urge you to use the insights offered by this Report when planning, delivering and evaluating services; engaging with communities; and building partnerships. Only by working together can we address the systemic barriers that impede women's equality.

Maria Osman
Executive Director
Office for Women's Policy

Summary Indicators for WA Women

2003/04*

Opportunity

Business leaders (% women CEOs)	12.7%
Public sector (% women corporate executives)	27.1%
Small business operators (% women)	34.5%
Commencing higher education engineering students (% women)	21.1%
Government boards and committees (% women)	29.3%

Workplace

Labour force participation rate (%)	57.4%
Underemployed part time workers (% women)	21.5%
Gender pay gap (difference between male and female earnings – percentage points)	23.0
Apprentices in training (% women)	12.7%
Flexible working arrangements for mothers (% of women with access)	43.9%

Law

State Parliament (% women in Legislative Assembly)	22.8%
Judiciary (% women)	24.4%
Legal practitioners (% women)	29.4%
Police officers (% women – sworn)	13.1%
Imprisonment rate (per 100,000 adult women)	26.2

Family Care

Caring rate (% of women)	12.1%
Choice in undertaking caring role (% all carers – no choice)	36.7%
Labour force participation rate of primary carers (%)	43.8%
Unmet demand for formal child care (%)	4.2%
Sole parent families in lower income range (%)	30.1%

Safety

Perception of safety on public transport (% usually/always safe on trains/buses at night)	71.0%
Perception of safety at home after dark (% safe/very safe)	68.0%
Reported violence against women in the community (% of all women aged 15-64 reporting assaults)	0.39%
Clients receiving SAAP support for domestic violence (% of all clients)	46.8%
Sexual assault victimisation rate (% of female population aged 18 and above)	0.7%

Seniors

Perception of ageing (% fairly/very positive stage of life)	53.0%
Self assessed health status (% women aged 65 years and over – very good/excellent)	34.6%
Participation in physical activities (% women aged 60 years and over)	57.3%
Perception of safety at home after dark (% women aged 65 years and over – safe/very safe)	64.5%
Reliance on government pensions (% women aged 60 years and over)	62.4%

Health

Lung cancer related deaths (age standardised rate per 100,000 women)	23.0
Physical activity level (% moderate/high)	37.2%
Breast cancer screening programs (% participating aged 50-69 years)	57.0%
Use of pharmaceutical medications to improve mental wellbeing (% of all women)	22.2%
General practitioners (% women)	33.4%

* Relates to most current figure at 2003/2004

Overview

This publication is about measuring the progress of women in Western Australia. It seeks to measure whether life, on average, is getting better for Western Australian women in seven key areas identified by Government.

These are:

- Fairness in Health Services
- Fairness in the Workplace
- Safety
- Promoting Opportunity
- Senior Women
- Fairness in Law
- Fairness in Family Care

What represents progress for women in Western Australia?

The assessment of what represents progress for women is a complex question, and even more so in a diverse society such as ours. One woman's definition of what constitutes progress will not necessarily coincide with another individual's values. Even where general agreement may exist on particular measures, the relative importance placed on each is likely to be different, reflecting an individual's life experience and values.

To seek the views of women in Western Australia on what represents progress, the Government held a Women's Convention in 2002. The Convention brought together around 1,000 women over two days to explore these matters and develop goals in each of the seven areas.

Particular attention was paid to ensuring the diversity of women in Western Australia was represented at the Convention. Convention attendance represented a broad spectrum of age, culturally and linguistically diverse backgrounds and geographic location.

The Convention process produced the goals that lead each section of the Women's Report Card. It is progress towards these goals that the Women's Report Card seeks to measure. Many of the goals are multifaceted, providing several dimensions against each area that are important to women in Western Australia.

The Convention explored issues around these seven goals, identifying a range of issues and priorities under each area. This information provides further insights into how the goal might be measured and has been used in developing the indicators.

Selection of key indicators

The selection of indicators was influenced by four main factors:

- Community engagement with women.
- Current policy issues and debates focusing on women.
- National and international measures of outcomes for women.
- Availability of data relating to women in Western Australia.

Data availability has been a significant factor in developing this report. A range of data on women available at the national level cannot be found at the State level. Where an issue cannot be measured directly, alternative or proxy indicators have been sought.

Two types of indicators have been provided. Where possible, a 'single number' approach has been used. For example, the gender pay gap is usually expressed as women's average wage as a proportion of the average wage of men. The goal in this case (reducing the pay gap) is clear and expressed well by a single number. Where information is more complex, a 'suite of indicators' is used. This provides several insights into the issue but is less decisive than a single indicator.

Change vs progress

A substantial amount of data on the status of women in Western Australia exists that has not been included in this publication. This includes very significant trends, such as the declining fertility rate and the tendency for non-Indigenous women to have children later in life (currently around 30 years of age).

While both these trends have extensive implications for women and society in general, they are characterised as change rather than progress.

A separate publication, providing a statistical profile of women in Western Australia, will be developed that will incorporate this information. The Women's Report Card and subsequent Status Reports are intended to be complementary publications, informing women in the community, researchers and policy makers with the best available information on trends for women in Western Australia.

Further development

As data become available, the relevant indicators will be updated and published online, enabling users to track the relative status of each area.

Some key surveys are only conducted every few years while other data are available annually. In general, data that is updated frequently has been sought to enable regular updates.

The Office for Women's Policy will annually produce additional publications focusing on particular groups of women in Western Australia. These will form a critical adjunct to the progress indicators, which measure the situation for women at a highly aggregated level. The issues and circumstances for Indigenous women, women from culturally and linguistically diverse communities, and women in regional areas are unique. For a truly inclusive society, it is essential these issues are recognised and understood.

Implications for Government policy

The Women's Report Card and the planned complementary publications are designed to inform researchers and policy makers on current issues for women in Western Australia. This is intended to support the capacity of policy makers and researchers to consider the implications for women, (integrating a gendered approach) into research and delivery of government services.

The development of the publication has also highlighted a lack of data in several crucial areas for women in Western Australia. Measures to address the need for additional data will form part of the Office for Women's Policy's strategic planning. The Office has worked with the Australian Bureau of Statistics on a major project to improve the collection of data on sexual assault. Work is also underway within government to improve and provide more information on the incidence and response to family and domestic violence in Western Australia.

Most importantly, this report is for the women of Western Australia. Many women have provided their suggestions through community forums and events organised by the Office for Women's Policy, on issues of most importance to them.

It will be the future task of the Government, working in partnership with the community and business, to address the issues raised in this Report.

Opportunity

GOAL

Create a society where the diversity of women is recognised and valued, where women have opportunities in leadership, and where opportunities in employment, education and training are fair, accessible and affordable.

Explanation

Gender equity will be achieved when systemic barriers to full participation in public life are removed.

The major indicators are: school retention rates; access to education and training opportunities; occupation, industry and earnings potential; elected positions in government; representation on government boards and committees; and senior management positions.

Indicator 1 – Women as business leaders

The proportion of women Chief Executive Officers (CEOs) in private sector companies employing over 100 people in WA is **12.7%**¹.

Discussion

The number of women CEOs in WA companies and non-government organisations is an indicator of leadership in the private sector. CEOs hold the top positions in their own organisations, and exert significant influence within business and the broader community.

Indicator 2 – Women in senior positions in public authorities²

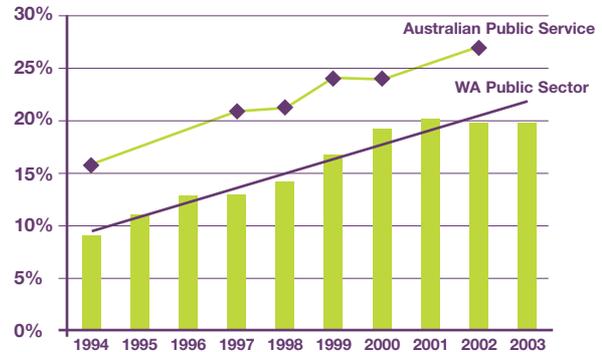
Representation of women in management positions in public employment, including the public service, local government and universities.

Women in management in public service

Proportion of women in management in the public service in 2003:

- Tier 1 (Senior Executive Service) – **20.5%**
- Tier 2 (Corporative Executive) – **27.1%**
- Tier 3 (Line Managers) – **30.1%**

Women as % of the Senior Executive Service 1999–2003



Women in management in local government

Proportion of women in management tiers in local government in WA in 2002:

- Tier 1 – **4.2%**
- Tier 2 – **16.6%**
- Tier 3 – **27.7%**

Women in management in universities

Proportion of women in management tiers in universities in WA in 2003:

- Tier 1 – **25.0%**
- Tier 2 – **28.6%**
- Tier 3 – **30.3%**

Discussion

Senior positions allow opportunities for leadership and decision making. The representation of women in senior positions within public employment is a critical indicator of how well legislative provisions such as the Equal Opportunity Act 1984, are working to achieve equity and diversity in employment. Activities under Part IX of the Act cover employment issues and seek to address systemic and indirect discrimination against women.

Indicator 3 – Women in small business

In 2001, women represented **34.5%** of small business operators in the State³.

In November 2003, **11.9%** of WA women in the labour force were self employed⁴.

Discussion

Research suggests that many women begin a small business due to the potential it offers for greater flexibility in combining work and family responsibilities.

The above figures show that over one third of small businesses in the State are operated by women. Since 1999, small business growth in Western Australia has been driven largely by the growth in women operators.

Indicator 4 – Participation in post compulsory secondary education

Apparent retention rates

During the period 1998 to 2002, the retention rate of young women in WA to Year 12 was **78.3%**⁵

Participation in vocational education and training (VET)

In 2002, women represented **45.7%** of students enrolling in VET courses⁶.

Participation in higher education

In 2002, women represented **57.2%** of commencing higher education students in WA⁷.

Discussion

The retention of young women in post compulsory education to Year 12, is an important indicator of future economic and social wellbeing. It is well established that young women who remain in school during the post compulsory years are more likely to proceed to post secondary education and secure future sustainable employment opportunities.

Likewise, women who undertake further education and training enjoy greater employment opportunities, higher incomes and enhanced health and levels of wellbeing.

Young women are staying on longer at school than their male counterparts.

The concentration of women in traditional fields of study limits broader employment opportunities.

VET	
High Enrolment Fields	Proportion of Total Women's Enrolments
Management/commerce	25.4%
Society and culture	22.0%
Mixed field programs	11.4%
Education	10.6%
Total	69.4%
Fields of Lowest Representation	Proportion Women
Engineering/related technologies	10.5%
Architecture/building students	12.4%
Agriculture/environment related studies	21.9%
HIGHER EDUCATION	
High Enrolment Fields	Proportion of Total Women's Enrolments
Society and culture	22.6%
Education	18.0%
Management/commerce	16.5%
Health	14.9%
Total	72.0%
Fields of Lowest Representation	Proportion Women
Engineering	21.1%
Information technology	17.3%

Indicator 5 – Women in elected positions in government

Local Government

Proportion of women elected as local government councillors⁸.

Year	1989	1992	1993	1995	1997	1999	2001	2003
Elected Women	15.2%	17.0%	19.6%	21.0%	24.8%	23.0%	27.6%	26.2%

State Government

Proportion of women members of both houses of State Parliament.

At December 2003, women comprised **22.8%** of members in the Legislative Assembly, and **29.4%** in the Legislative Council⁹.

Federal Government

Proportion of WA women members of both houses of Federal Parliament.

At December 2003, women comprised **33.3%** of WA members in the House of Representatives and **16.7%** in the Senate¹⁰.

Discussion

The representation of women as elected members of Government is one of the most widely accepted and recognised measures of the status of women in society. Most countries and jurisdictions monitor the representation of women in elected government, providing a common base for comparison.

Women remain under represented in elected positions across all tiers of government. Local government provides the best opportunity for community engagement, capacity building and partnerships across service delivery agencies at all levels of government, and with the non government sector.

Indicator 6 – Women on government boards and committees

As at January 2004, **29.3%** of members on WA Government boards and committees were women¹¹.

Discussion

The number of women on government boards and committees is an indicator of women’s leadership and influence in high level government decision making. It is of concern that less than a third of all members are female, given the very broad policy scope and the need for decision making processes in government to reflect diversity in the community.

Indicator 7 – Women in unions

The number of women elected as delegates to the peak decision making body of unions in WA in 2003 was **42.0%**¹².

Discussion

The number of women elected as delegates to the peak decision making body of unions in Western Australia is an indicator of their influence both within their own individual unions, and on the Council. Unions play an important role in safeguarding the interests of all workers, particularly as women of all ages are increasingly entering the paid workforce.

Workplace

GOAL

Fair, flexible and supportive workplaces where women are recognised for their contributions, skills and diversity in all occupations and have equal opportunities for career development and advancement.

Explanation

This goal reflects the importance of careers and employment in a fair and supportive workplace in order for women to pursue economic security and independence.

The major indicators are: training opportunities; labour force participation rate; pay gap; access to family friendly measures.

Indicator 8 – Labour force participation

Participation rate

In 2003, women’s labour force participation rate in WA was **57.4%**, while men’s participation rate was **75.4%**¹³.

The chart below shows the growth in women’s labour force participation over the last two decades and also the comparative participation rate of women nationally. Women’s participation rates in WA have been consistently higher than the national average.



Unemployment rate

In 2003, the unemployment rate for women in WA was **5.9%**, the same as for men¹⁴.

Underemployment

Of women working part time in WA, around one in five (**21.5 %**) would prefer to work more hours¹⁵.

Discussion

The substantially increased participation of women in the paid labour force represents one of the most significant economic and social shifts for women in recent decades. Minimum wage setting and the arbitration system in Australia were originally built on the assumption of a sole male breadwinner. This assumption persisted in designing policy for many decades beyond the original minimum wage decision in 1907.

Labour force participation provides a means of achieving economic security, wealth accumulation and through superannuation, economic security in retirement. While unemployment rates are a leading economic indicator, unemployment rates for women require careful interpretation. Women’s working patterns are predominantly shaped by their child bearing and rearing responsibilities.

Women are more likely to be 'underemployed', that is they would prefer to work more hours. Under employment mainly occurs among part time and casual workers, who are predominantly women. This is not reflected in unemployment rates.

There is also a degree of hidden unemployment among women. 'Discouraged workers' describes individuals who have effectively given up seeking work and are no longer considered as 'unemployed' as they no longer actively seek work.

Indicator 9 – Working arrangements

Part time employment as a proportion of total employment

Of all employed women in 2003, **48.7%** were employed part time¹⁶.

Multiple jobs

Women are more likely to be multiple job holders, with one in ten (**11.5%**) women having several jobs compared with 6.7% of men¹⁷.

Casual labour

In 2000, **21.5%** of women in WA were working casually (ie had no paid leave entitlements). Almost 58% of all casual employees are women¹⁸.

Discussion

Australia currently has the third highest level of part time employment among OECD countries¹⁹. The increasing proportion and concentration of women in part time jobs has many implications, particularly with regard to the associated lower rates of pay, casualisation and fewer opportunities for skill development. However, many women choose to work part time to balance family and work responsibilities. Similarly, an increasing proportion of young women combine part time work with education and training.

As the underemployment indicator demonstrates, part time employment may not provide sufficient hours of employment. Having several jobs is one means of achieving adequate income. Having multiple jobs may produce benefits such as acquiring additional skills and experience, but can potentially create difficulties in arranging child care and increased travel time, particularly when reliant on public transport.

Casual employment may offer higher rates of take home pay (on account of pay loadings) and more flexible hours. However, the trade off is employment security and other benefits such as paid leave for illness, holidays and maternity.

Indicator 10 – Workplace training

Participation in employment based training²⁰

In 2003, women represented **12.7%** of the state's apprentices in training (4.4% when excluding hairdressing) and **42.4%** of trainees.

Discussion

As the Opportunity section further explores, more women than men now undertake degree courses in universities, however, women's enrolments are concentrated in traditional fields of study.

Among apprenticeships, women remain poorly represented in manual trades and over represented in hairdressing. These factors contribute to ongoing occupational segregation in many industries.

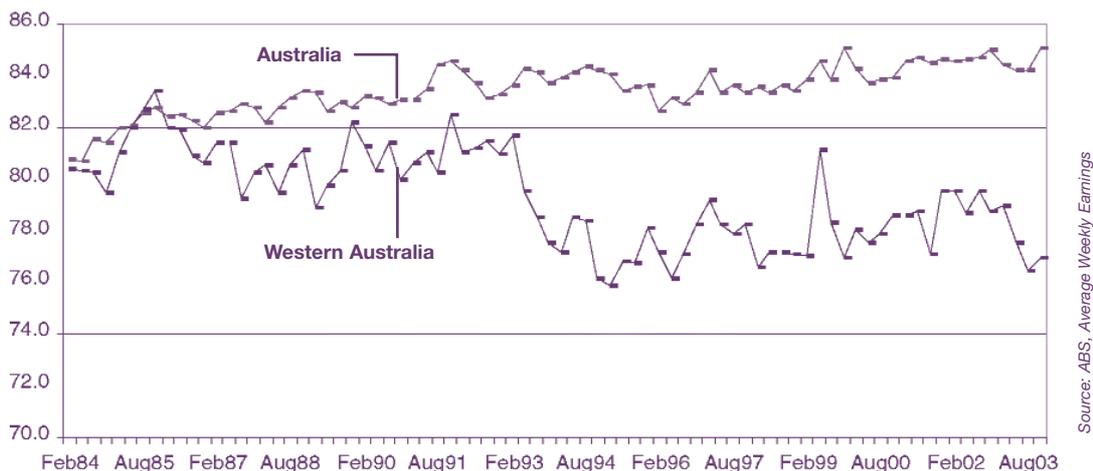
In terms of apprenticeships, occupational segregation is very pronounced. Approximately 69% of apprenticeships for women in WA are in hairdressing.

Indicator 11 – Pay equity

Pay gap²¹

In August 2003, WA women received **77.0%** of men's average weekly earnings, producing a gender pay gap of **23 percentage points**. Nationally, women received 85.1% of the average male weekly earnings (a gap of 15 percentage points).

Female Earnings as Proportion of Male's Full Time Ordinary Time Earnings



As the chart shows, in contrast to the national trend, the pay gap between women and men in WA has widened during the last ten years.

Discussion

The difference between male and female average earnings is considered a key indicator of equity between men and women. Despite laws passed to ensure equal pay between men and women since 1969, pay equity has not been achieved.

WA has the largest gender pay gap of any state and territory in Australia.

It is important to note the gap reported here under represents the gap in earnings, as it does not include

additional earnings such as overtime. If total earnings were calculated the gap would be significantly larger, as men are substantially more likely to earn additional income such as overtime and penalty payments.

Occupational segregation is considered to be a possible factor contributing to the gap between men's and women's wages in WA.

The table shows the over representation of women in particular occupations. In terms of actual numbers and as a proportion of total employees, women are significantly concentrated in clerical, sales and service occupations. These occupations require less skill, are lower paid and often part time.

Indicator 12 – Family friendly workplaces

Major Occupation Group	Women		Men	
	No. employed	Proportion of Total	No. employed	Proportion of Total
Managers and Administrators	20,200	27%	54,600	73%
Professionals	80,500	47%	89,100	53%
Associate Professionals	50,400	39%	77,500	61%
Tradespersons and Related Workers	11,900	9%	127,300	91%
Advanced Clerical and Service Workers	36,000	89%	4,400	11%
Intermediate Clerical, Sales and Service Workers	117,700	75%	39,100	25%
Intermediate Production and Transport Workers	9,100	11%	73,800	89%
Elementary Clerical, Sales and Service Workers	68,100	67%	33,000	33%
Labourers and Related Workers	32,000	35%	60,600	65%
Total	426,000	43%	559,500	57%

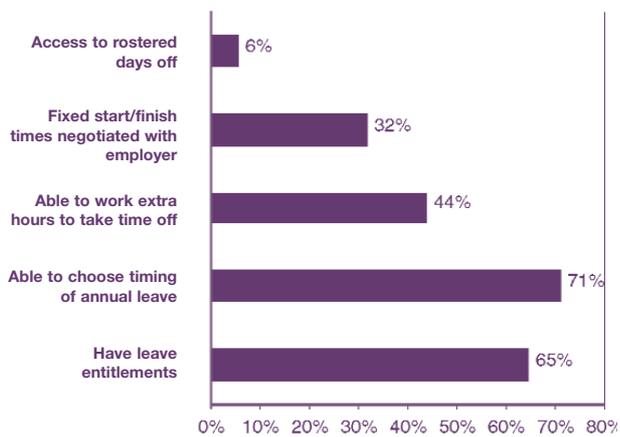
Source: ABS, Labour Force Survey

The working arrangements available to women with children below 12 years of age provide an indication of the ‘family friendliness’ of workplaces.

The following chart shows the proportion of WA women with children aged below 12 years of age who have access to flexible working arrangements and entitlements.

The table below shows that women with children below 12 years of age have the least access to rostered days off. It is important to note a high proportion of women in

Working Arrangements of WA Women With Children Below 12 Years of Age



this group work part time (71.2%).

While being the most likely to negotiate start and finish times, women with children below 12 years of age have the least access to sick and holiday leave. This reflects the high level of casual work among women.

Discussion

The ability of women to participate in the labour force is directly influenced by their capacity to balance the needs of work and family. The increasing participation of women in the labour force has become one of the most significant issues for women in industrialised countries.

There may also be links between the availability of family friendly workplace arrangements and fertility. The fertility rate of Australian women is now at an historical low of 1.7, from a high of 3.5 in 1961²³. Academics such as Peter McDonald²⁴ have suggested fertility rates in industrialised countries are heavily influenced by the level of support for mothers to combine work and family. That is, fertility rates will fall where support for combining work and family is poor.

Comparative Working Arrangements WA 2000

	With children aged under 12 years		Without children aged under 12		Total	
	Women	Men	Women	Men	Women	Men
Access to rostered days off	5.6%	14.7%	14.1%	18.0%	12.2%	17.1%
Fixed start/finish times negotiated with employer	31.6%	11.8%	19.5%	13.8%	22.2%	13.3%
Able to choose timing of annual leave	71.2%	71.6%	69.4%	71.3%	69.8%	71.4%
Able to work extra hours to take time off	43.9%	39.2%	41.9%	38.3%	42.3%	38.5%
Have sick and holiday leave entitlements	64.6%	81.6%	72.6%	74.6%	70.9%	76.4%

Source: ABS, Working Arrangements, Cat. No. 6342.0, November 2000.

Law

GOAL

To create a legal system where both the system and law is accessible, based on sound gender analysis and is responsive to women's concerns and life experiences.

Explanation

This goal reflects the importance of ensuring the law is responsive to the issues in women's lives and that both process and outcomes are fair.

The major indicators are: law enrolments; proportion of women members of parliament; local government councillors; ATSI representatives; women as practising lawyers and representation in the judiciary; police officers; sexual assault and imprisonment rates.

Indicator 13 – Women in the legislative process

Proportion of WA members of Federal Parliament that are women in 2004²⁵

Of the WA members of the House of Representatives, **33.3%** are women. Of senators, **16.7%** are women.

Proportion of members of the WA Parliament that are women in 2004²⁶

In the WA Parliament, **25.2%** are women. In the Legislative Assembly, **22.8%** are women and in the Legislative Council, **29.4%** are women.

WA Local Government²⁷

Following the May 2003 local government elections, **26.2%** of all councillors in WA were women.

Discussion

Less than one third of all legislative positions are held by women.

The proportion of women as elected representatives of government is one of the most common measures of the progress for women. WA was one of the earliest jurisdictions in the world to provide the vote for women. In the Australian political system, law is primarily created by the Parliament. The sensitivity of law to issues for women is likely to be affected by the level of representation.

The representation of women within each sphere of government has different and important implications. Apart from having the primary role in matters such as taxation and child care funding, the Australian Government has responsibility for international treaties and conventions such as the United Nations Convention on the Elimination of all forms of Discrimination Against Women (CEDAW). International Treaties may have a direct impact upon both state and federal laws. Equal opportunity legislation in Australia and WA needs to be consistent with international obligations.

The State Government has primary responsibility for laws on matters such as sexual assault and domestic violence, child protection and essential services such as public transport.

The under representation of WA women in the legislature is cause for concern. Local government is the most accessible sphere of government and provides a potential pathway for women in the community to assume leadership roles.

Indicator 14 – Women as proportion of Aboriginal and Torres Strait Islander Commission (ATSI) Councillors²⁸

Level	2004
ATSI Regional Councils (WA)	23%
ATSI Regional Councils (National)	28.5%
ATSI State Council (WA)	0%
ATSI National Board	5.5%

Discussion

The Aboriginal and Torres Strait Islander Commission (ATSIC) is Australia's national policy making and advocacy organisation for Indigenous people. It is an independent statutory authority established by the Australian Government under the ATSIC Act 1989.

A range of significant issues exist for Indigenous women, with family and domestic violence currently considered to be a priority issue for ATSIC. Strong representation of women on the body responsible for policy matters such as this is considered an advantage.

Indicator 15 – Women in the legal system

Representation of women in the judiciary²⁹

WA Courts	% Women (At January 2004)
Supreme Court	18.8% of judges
District Court	26.0% of magistrates
Magistrates Court	22.5% of magistrates
Family Court	40.0% of judges
Children's Court	33.3% are judges
Total Women	24.4% of all judiciary

Discussion

Increasing the number of women serving in the judicial system, where laws are interpreted and applied, is equally important as ensuring women are represented in Parliament, where the laws are made.

Women as a proportion of law students³⁰

In 2003, **56.7%** of law students enrolled in WA were women.

Women as lawyers and senior counsel³¹

At January 2004, **29.4%** of legal practitioners in WA are women and **4.8%** of senior counsel are women.

Discussion

Women now comprise the majority of students undertaking law at university and currently comprise around a third of all solicitors in WA. Nationally, concern currently exists regarding the comparatively low numbers of women achieving senior counsel.

Indicator 16 – Women in the police service³²

Women as a proportion of sworn police officers

In 2001, **13.1%** of sworn police officers in WA were women.

Women as a proportion of sworn and unsworn police officers

WA has the lowest proportion (**20.1%**) of sworn and unsworn women police officers of all states and territories. Nationally, 28.2% of police officers are women.

Women as senior police officers

Women were not represented at the senior executive level of the police service in 2001.

Discussion

It is regarded as important to reflect the diversity of the community in professions such as policing. Issues relating to gender and culture may have a significant bearing on policing matters within the community. In matters such as sexual assault and domestic violence which are substantially under reported, a lack of female police officers may discourage reporting. This is particularly the case for some cultural groups where special sensitivities exist.

Indicator 17 – Women and crime

Outcome of police investigations of sexual assault at 30 days

Investigations in which an offender was proceeded against, as a proportion of investigations finalised³³.

In 2002, 1620 cases of sexual assault were investigated in WA (of which **85.1%** involved female victims). After 30 days, **39.3%** (or 636 cases) were finalised ('finalised' meaning an investigation was completed). Of 'finalised' cases, **53.1%** (338) resulted in proceedings against an offender.

Discussion

The outcome of investigations after 30 days is an indicator used by the Australian Government's Productivity Commission³⁴ to compare the performance of each jurisdiction's police service.

Confidence in the response of the justice system to sexual assault victims is considered an important factor in encouraging victims to report sexual assaults.

Women in prisons

The imprisonment rate for women in WA in 2002 was **26.2** per 100 000 adult women³⁵.

Discussion

The imprisonment rate for women in WA is the second highest of all states and territories (the Northern Territory has the highest imprisonment rate for women at 30.0) and is significantly higher than the national average of 19.2.

Of sentenced women prisoners in WA, **35.8%** were serving sentences for fine defaulting, with Indigenous women representing a significant proportion. Of sentenced Indigenous women prisoners in 2002, 49.6% were in prison for fine defaulting, compared to 15.6% of non-Indigenous women³⁶.

Family Care

GOAL

A society in which carers are recognised and valued, affirming the centrality of family while also recognising the diversity of families and acknowledging that it is women who remain principal carers.

Explanation

This goal acknowledges women's contribution to the delivery of different forms of care in the community and the importance of supporting carers.

The major indicators are: primary care; formal and informal care of family members; access to affordable child care; and income.

In 1998, **57.6%** of carers indicated the principal reason for caring was family responsibility, and **36.7%** of carers indicated that they had no choice in undertaking a primary caring role.

Primary Carer's Reasons for Taking on Role

	Proportion of Carers*
Could provide better care	36.1%
Family responsibility	57.6%
No other family or friends available or willing	31.8%
Emotional obligation	36.7%
Had no choice/alternative care unavailable	36.7%
Other reason/not stated	8.6%

* Column does not sum to 100% as carers may report more than one reason

Source: ABS, Disability, Ageing and Carers

Indicator 18 – Provision of family care

In 1998, **66.2%** of primary care^a was performed by women.

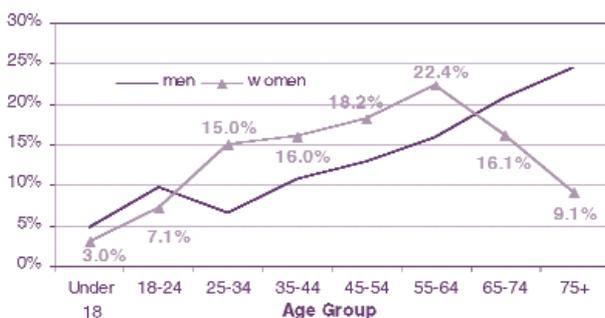
In 1998, **12.1%** of all women were carers³⁷.

On average, Australian women spend **3 hours and 15 minutes more** than men per day caring for children (including teaching, playing and reading with or driving them around)³⁸.

Women are more likely than men to care for children, grandchildren, aged parents, family members with a disability and other relatives.

The graph shows the proportion of the WA population who were both primary and non primary carers in 1998. The likelihood of becoming a carer for women is greatest between the ages of 55 and 64 years, while for men it is 74 years and over. (This reflects the longevity of women, the increasing tendency for women to be widowed and for men to be caring for their partner.)

WA Caring Rates



Source: ABS, Disability, Ageing and Carers, WA, 1998

Discussion

Although there is a multiplicity of views on ideal family care arrangements, it is generally acknowledged that major shifts in the nature of intimate relationships, family formation, parenting and workforce participation are having a significant impact on caring activities in the community.

Women perform two thirds of all primary caring activity in the community.

Primary caring can impact negatively on a carer's income, living costs, health, family relationships and participation in paid work, study and recreational activities.

The likelihood of becoming a carer increases with age, and gender based differences become more apparent. An increase in caring rates reflects an increase in demand that will be met predominantly by women across most age groups.

A lack of alternative care options for family members (including accommodation, respite services for the disabled, aged and child care) has a dramatic impact on women's capacity to perform other roles in the community.

It is unlawful to discriminate against a person on the grounds of family responsibility, under the WA Equal Opportunity Act.

^a A primary carer is someone who provides the main care and support for a parent, partner, child, relative or friend who has a disability, is frail aged, or who has a chronic mental or physical illness.

Indicator 19 – Family care and the workplace

Labour force participation rate of primary carers

Although more than three quarters of primary carers are of workforce age (18 to 64 years), their labour force participation rate is **43.8%**. The participation rate of non carers is 69.4%³⁹.

Availability of formal child care⁴⁰

Unmet demand for formal child care in WA is **4.2%**⁴⁰ based on 2002 figures.

Sole parents and employment

Of all sole parent families in WA, **86.5%** are headed by women⁴¹.

In **49.0%** of sole parent families, the parent is unemployed.

As the graph shows, a significantly higher proportion of sole parent families are in the lower income ranges and 30.1% have an average weekly income below \$400⁴².

Discussion

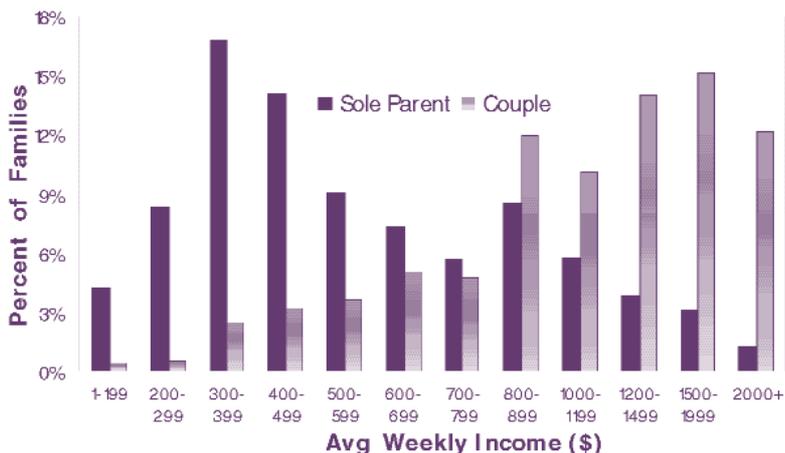
The provision of formal child care is a key factor supporting the participation of women with young children. The growing proportion of women in employment with young dependent children represents one of the major shifts in Australian society. The current trend is towards an earlier return to work after the birth of a child.

The availability of child care measures the total demand and supply of formal child care. While overall demand exceeds supply, availability varies considerably in specific locations. Similarly, there may be shortages in particular types of child care such as outside school hours care and care for babies.

The availability and affordability of formal child care represents an important indicator of the ability of women to pursue economic independence, careers and personal development opportunities such as further education and training. The availability of flexible working arrangements enables women and men to combine family caring responsibilities with their participation in the workforce. (See also Workplace section.)

Many sole parents have reduced capacity to earn an income, due to their caring responsibilities.

Income Range of WA Families with Children



Source: ABS, Census 2001

Safety

GOAL

Through community and government, create a coordinated, collaborative and holistic approach for a safe living, working and social environment for all women and their families.

Explanation

This goal reflects the importance of women being and feeling safe in their homes, participating in community life and their workplaces.

The major indicators are: incidence of reported crimes against women in the home, workplace and community; perceptions of safety; sexual assault; family and domestic violence.

Indicator 20 – Violence against women in the home, workplace and community

Women in WA seek security and safety in all aspects of their lives – at home, at work and in the community. The goal developed through the Women's Convention recognises that different safety issues arise in these three areas, requiring different responses.

In considering safety issues for WA women it is useful to note the overall picture. The most comprehensive survey on women's safety in Australia was conducted by the Australian Bureau of Statistics in 1996⁴³.

It is estimated that around **0.5 million** women aged 18 years and over had experienced some form of violence in the previous 12 months. That represents **about 7%** of adult women.

Beyond the 7% of women who are estimated to directly experience violence in any year, **fear** of violence can affect all women, restricting their ability to participate in society. The ABS survey found 58% of women did not walk alone in their area after dark; 52% of female users of public transport said they did not feel safe waiting alone for public transport after dark.

A Safety Survey⁴⁴ conducted by the City of Perth in 2002 found that:

- The City of Perth is a comparatively safe place for women.
- Some women are safer than others. Young women aged 15 to 24 years are the age group most likely to be the victims of crime.
- Indigenous women have higher rates of crime committed against them than other racial groups.
- Older women (55 years and over) are least likely to be victims of crime.
- Most crime against women occurs in places located on main streets.
- The most common crime reported by women was stealing – and it most commonly occurred in the central business district.

For further discussion on the links between crime and safety, see the Law section.

Reported violence against women in the home^x in 2002.⁴⁴

	Murder	Attempted murder	Assault	Sexual assault
Incidents	16	11	3892	984
Proportion of offence occurring in the home	69.6%	100%	59.9%	71.4%

⁴³ Source: Women and Safety in the City of Perth, June 2002, City of Perth.

^x 'Home' refers to incidents occurring in a dwelling, outbuilding or residential land.

Discussion

While most women regard their home as a place of safety, the majority of violence against women occurs in residential locations, with the perpetrator generally known to the victim. This is true for most violence against women, particularly sexual assault, and family and domestic violence.

The actual rate of violence against women in the home is significantly higher than these figures, as much goes unreported. Increases or decreases in **reported** violence against women in the home need to be carefully interpreted as this may represent more or fewer incidents being reported to police rather than an increase in violence itself. Government efforts to address family violence and sexual assault encourage women to seek assistance and report these matters.

Incidence of reported violence against women committed in the community in 2002⁴⁵.

	Murder	Attempted murder	Assault	Sexual assault
Incidence rate in female population 15-64	.00015	0	.39	.06
Incidents	7	0	2593	389
Proportion of offences committed at a location in the community	30.4	0	40.1%	28.6%

Discussion

Community is broadly defined as locations other than work and residential locations. There are significant gender differences in experience and perception of safety in public spaces. For example, women typically feel less safe than men walking alone in their neighbourhood after dark or on public transport.

Violence against women that is perpetrated in the broader community, such as streets and shops, is much less common than in the home. The pie chart opposite shows the incidence of violent crimes (murder, attempted murder, assault, sexual assault) reported to police against men and women by the location of the offence. Common assault is the most likely reported violent offence against women outside the home. It should be noted that crime data does not differentiate between assault and domestic violence.

Reported violence against women in the workplace

There were **886⁴⁶** reported incidents of violence against women reported in workplaces between 1997-98 and 2001-02. The incidence of reported violence in the workplace against women in Western Australia is **2.24 incidents for every 1,000 women.**

Discussion

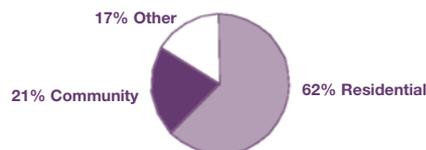
As women have substantially increased their participation in the workforce, they are increasingly exposed to violence at work. This violence may relate to the workplace, such as violence from other workers or from clients. Violence against health care workers, such as staff in emergency wards, is of particular concern.

Domestic violence also affects workplaces, both directly (such as harassing a partner at the workplace) and indirectly. According to the Australian Government's Partnerships Against Domestic Violence (PADV) program, around \$28 million p.a. is lost through absenteeism and \$425-600 million p.a. through lower productivity.

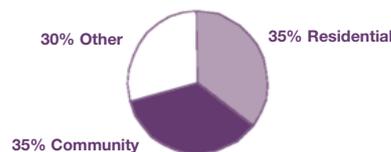
The majority of reported violence against women occurred in the health and community sector (579 out of 886 incidents). Although the sector only employs around 17% of women in the Western Australian labour force, it accounts for nearly two thirds (65%) of all reports of workplace violence towards women. The risk of occupational violence among welfare workers and nurses is also reflected in research in other countries. For example, in the UK, a National Health Service study estimated one in seven reported work related injuries were caused by violence⁴⁷.

An aspect of violence in the workplace that is receiving growing attention is bullying. Workplace bullying may involve physical assault, threatening behaviour or racial and sexual abuse. A Morgan poll in 1998 indicated 46%⁴⁸ of workers had experienced either verbal or physical abuse from a colleague or manager.

Violence Against Women by Location



Violence Against Men by Location



Indicator 21 – Women and crime

Sexual assault victims

In 1999 (the most recent survey), the ABS estimated there were around 5,000 victims of sexual assault in WA over 12 months, giving a **victimisation rate of 0.7%**. Around 1,500 cases were estimated to involve more than one incident⁴⁹.

Discussion

The victimisation rate estimates how common sexual assault is in WA among women aged 18 years or older over a 12 month period. It is obtained by use of a survey conducted by the ABS. It is expressed as a percentage of all women in Western Australia over 18 years.

In a survey conducted by the Office of Crime Prevention on community attitudes in WA to crime⁵⁰, sexual assault was rated as the second 'most important' crime, exceeded only by child abuse.

Sexual assault is a crime that predominantly affects women and is currently the subject of initiatives by both the State and Australian Governments.

Sexual assault reported to police

In 2002, 1,378⁵¹ cases of sexual assaults on females in WA were reported to the police. This produces a 'prevalence rate' of **143 incidents per 100 000** people in WA.

Discussion

Sexual assault is largely a 'hidden' crime, with a minority of incidents (variously estimated to be in the region of 15%) reported to police. Measures to address sexual assault include encouraging victims to report assaults. As such, the rate of reported sexual assault should be considered along with the estimates of incidence gained from surveys⁵². An increase in the rates of reporting may represent a positive step, if this reflects greater confidence among women to report such crimes.

Proportion of Supported Accommodation Assistance Program (SAAP) clients whose reason for seeking a service was related to domestic violence⁵²

The proportion of SAAP clients whose need for assistance was due to domestic violence in 2002-2003 was **47%**.

SAAP provides a range of accommodation and support, including women's refuges.

In 2002-03, 4,350⁵³ SAAP clients received support from domestic violence agencies or cited domestic violence as a reason or main reason for seeking assistance.

Proportion of WA women admitted to hospital where the cause was 'maltreatment by a spouse'⁵⁴.

The proportion of WA women admitted to hospital where the cause was 'maltreatment by a spouse' was **0.06%** in 2002-2003.

570 women were discharged from WA hospitals during 2002-03 where the reason for hospitalisation was maltreatment and the perpetrator was a spouse.

Discussion

Family and domestic violence crosses all socio-economic, cultural and religious boundaries. The incidence of domestic violence in Western Australia is currently not known. A data project involving government agencies dealing with different aspects of family and domestic violence has been instituted to address this deficiency in available information.

Like sexual assault, domestic violence is substantially under reported and a clear distinction needs to be made between the actual incidence and those cases that are reported.

The SAAP and hospitalisation data can be regarded as providing a crude proxy indicator of the number of more serious cases of domestic violence coming to public attention annually. It should be noted the hospitalisation data refers only to maltreatment where the perpetrator is a spouse.

⁴⁹ 'Community refers to crimes committed in streets, public spaces, on transport and commercial spaces.

⁵⁰ Care is required in comparing sexual assault data from different sources as different populations are often measured. For example, ABS survey data is typically limited to women over 18 years old, while Police data may include both adult and child sexual assault.

Indicator 22 – Perception of safety in the home and on public transport

During the day **88.4%** of women feel safe/very safe at home alone; after dark this proportion drops to 68.0%⁵⁵.

Discussion

Despite the substantially greater risk of violence to women occurring in the home than anywhere else, most women assign a low risk to the home and a much greater risk of violence occurring outside the home.

Proportion of women who always or usually feel safe travelling on buses and trains⁵⁶

Location	Proportion of female travellers who always/usually feel safe
At stations/interchanges during the day	93%
At stations/interchanges at night	49%
On trains and buses during the day	97%
On trains and buses during the night	71%

Discussion

The perceived risk of violence in the community inhibits the ability of women to move around freely and participate in society. Where women rely on public transport, the ability to feel safe during their journey is an important factor in determining their ability to commute to work or attend social events and appointments. The first Women's Safety Survey⁵⁷ indicated that nationally, 30% of the 5.8 million women who did not use public transport said it was because they did not feel safe.

This survey also indicated about half of women who use public transport felt unsafe waiting for public transport alone after dark and about 35% felt unsafe using public transport alone at night. 34% felt unsafe walking alone in their area after dark and 22% felt unsafe alone at home in the evening at some time.

Perception of safety/risk of sexual assault

Around 45,700 persons (or 3.2% of people in WA) perceived sexual assault as a problem in their neighbourhood⁵⁸.

Discussion

Public perceptions of sexual assault, reinforced by media coverage, tend to focus on assault by strangers in places such as public open spaces. This is contrary to the fact that most perpetrators are known to the victim and most incidents occur at home or in a dwelling. About 85%⁶ of sexual assaults on women occur in a home, work or licensed premises⁵⁹.

⁶ Data refers to location of sexual assaults by perpetrator other than a partner.

Seniors

GOAL

To create a non-discriminatory society that affirms the value of seniors; supports choice, opportunity, health and safety for all and is sensitive to the needs and abilities of its seniors.

Explanation

This goal reflects the importance of providing a safe and supportive society for older women and to ensure they are actively engaged in the community.

The major indicators are: perception of ageing; self-assessed health status; physical activity levels; caring roles; social contact; safety and income.

Indicator 23 – Health and wellbeing

Perception of ageing⁶⁰

Of WA women, **53.0%** perceive ageing as a fair/very positive stage of life. Similarly, **55.0%** believe that ageing is a fair/very productive stage of life.

Self assessed health status⁶¹

In 2002, **44.0%** of WA women aged 55-64 years assessed their health status as very good/excellent. For women over 65 years, this proportion fell to one in three women (**34.6%**).

Physical activity levels⁶²

In WA, the participation rate of women aged 60 years and over in sport and physical activities was **57.3%**. However, as the graph shows, the participation rate declines with age.

Participation in Sport and Physical Activities
WA Women, 2002



Discussion

Women in WA perceive the experience of ageing as positive, however their health status and levels of physical activity decrease markedly after the age of 70 years. Studies show that older women often enjoy the highest levels of psychological wellbeing in the community.

Given the current life expectancy for women is 82.8 years, specific health programs will be required to target older women's health issues.

Indicator 24 – Family and community involvement

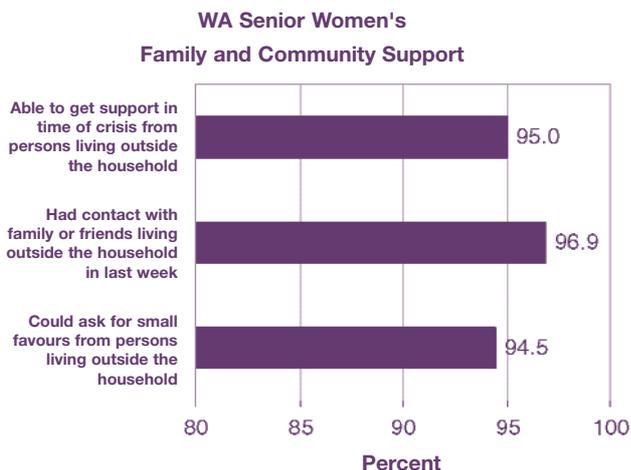
Caring responsibilities⁶³

Of women aged 65 years and over in WA, **13.4%** provide unpaid informal care and support for a relative or friend who has a disability, is frail aged, or who has a chronic mental or physical illness.

Extent of contact with family/friends⁶⁴

In the week prior to the ABS survey, **94.5%** of women aged 65 years and over had contact with family or friends outside the home.

While the graph shows the extent of contact with family or friends, it should be noted that **91.3%** were able to and had obtained all the below measures of support.



Source: ABS, General Social Survey, 2002

Participation in clubs/groups⁶⁵

For this purpose, the participation of women in voluntary work is used as a proxy indicator of active community participation.

In 2002, **36.3%** of WA women aged 55-64 years and **30.2%** of women aged 65 years and over undertook some type of voluntary work during the year.

Victims of elder abuse⁶⁶

Of WA women aged 60 years and over, **0.9%** are known or suspected victims of elder abuse. Women have an elder abuse prevalence rate 2.5 times that of WA men (0.35%).

Perception of safety at home after dark⁶⁷

Almost two thirds of women (**64.5%**) aged 65 years and over in WA indicated that they felt safe/very safe at home after dark.

Discussion

Women continue their close involvement with families, community and caring responsibilities as they age. Research shows that family, friends and social networks are an important support for older women, and that women remain better connected to their communities over the life course.

Indicator 25 – Older women and income

Average weekly income levels⁶⁸

The median weekly income of women aged 60 years and over in WA is **\$229**, compared with \$273 for men in the State.

Proportion of women reliant on government income support benefits⁶⁹

During the third quarter of 2003, **62.4%** of WA women aged 60 and over were reliant on government pensions and benefits as the main source of income. This compares with 44.8% of men of the same age.

Labour force participation⁷⁰

During 2003, the labour force participation rate for women aged 45-54 years was **76.5%**; **55.1%** for women aged 55-59 and **23.7%** for those aged 60-64 years.

The graph shows trends in the labour force participation rate of women over the last twenty years. Women are working longer and in greater numbers than ever before.



Computer usage⁷¹

In 2002, **13.8%** of women aged 65 years and over had used a computer at home in the previous 12 months. One in ten women (**10.3%**) had accessed the internet in their home. Of men aged 65 years and over, 27.1% had likewise used a computer and 19.1% had accessed the Internet.

Discussion

Income levels for older women reflect the continuing gap between male and female earnings over the life course. Whilst over half of women aged 55-59 years are still in the workforce, this figure drops dramatically at age 60 years. Currently, non Indigenous women can expect to live another 22.8 years, after turning 60. Active ageing must include a shift towards valuing women's skills and retaining older women workers in the workforce.

Health

GOAL

Improved health for all women through the provision of an affordable, accessible community based health care system, which contributes to and supports women's physical, mental and social wellbeing through a preventive approach.

Explanation

This goal supports the holistic objective of seeking improved health outcomes (rather than only addressing illness) leading to a genuine improvement in quality of life.

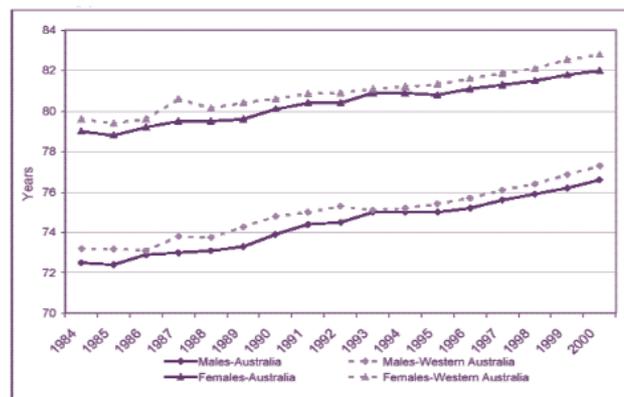
The major indicators are: life expectancy; leading cause of death; illness, injury and hospitalisation; psychological wellbeing; sexual and reproductive health; access to female medical practitioners.

Indicator 26 – Life expectancy and major cause of death

Life expectancy at birth

In 2000, the life expectancy of WA women at birth was 82.8 years. By comparison, life expectancy for Indigenous women in the State was 68.6 years (or 14.2 years less than for all women)⁷².

Life expectancy at birth, WA and Australia by sex⁷³



Cause of death⁷⁴

In the five year period from 1998 to 2002 the leading causes of death for WA women included cardiovascular diseases (ischaemic heart disease, cerebrovascular disease and other forms of heart disease) and cancers (breast, lung and colorectal).

Discussion

Life expectancy provides an indication of the general health of the population. An increase in women's life expectancy is associated with the ageing of the population, and is also indicative of improvements in factors including access to health care, diet and changes to women's social, economic and environmental circumstances. Leading cause of death is one indicator of the major burden of disease in populations.

WA women live slightly longer than other Australian women (the national average is 82.4 years). The leading causes of death among women include a range of preventable diseases linked to lifestyle. Cardiovascular diseases are particularly associated with physical inactivity, obesity and hypertension, whereas lung cancer and chronic obstructive pulmonary disease are strongly associated with tobacco. Harmful and hazardous levels of consumption of alcohol is also a major risk factor for a number of cancers.

Top 15 leading causes of death (female), WA 1998-2002

Condition	Deaths	% of total	ASR	95% CI
Ischaemic heart disease	4,733	18.90%	96.3	93.6-99.1
Collection of miscellaneous cancers	2,764	11.00%	59.9	57.7-62.1
Cerebrovascular disease	2,754	11.00%	55.5	53.4-57.6
Other forms of heart disease	1,367	5.50%	27.2	25.7-28.6
Breast cancer	1,099	4.40%	23.9	22.5-25.4
Lung cancer	1,035	4.10%	23.0	21.6-24.4
Colorectal cancer	908	3.60%	19.7	18.4-20.9
Alzheimers disease	742	3.00%	14.5	13.5-15.6
Chronic obstructive pulmonary disease	685	2.70%	14.6	13.5-15.7
Diabetes	681	2.70%	14.5	13.4-15.6
Organic psychotic conditions	605	2.40%	11.8	10.9-12.8
Pneumonia and influenza	527	2.10%	10.4	9.5-11.3
Diseases of arteries, arterioles & capillaries	500	2.00%	10.1	9.2-11.0
Uterine/Ovarian cancers	459	1.80%	10.1	9.2-11.0
Renal failure (acute & chronic)	312	1.20%	6.3	5.6-7.0

ASR – Age-standardised rate per 100,000 person years. Rates were standardised to the 2001 Australian population.

95% CI – 95% confidence interval for the associated ASR.

Source – Epidemiology Branch, Department of Health.

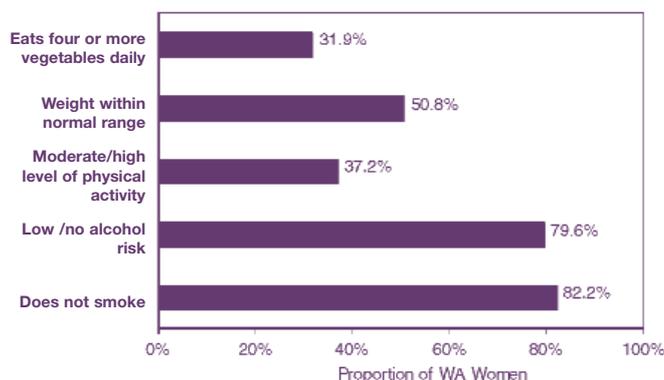
Indicators 27 – Lifestyle and associated risk factors⁷⁵

The proportion of WA women who engage in health promoting behaviours, including:

- nutritional intake;
- physical activity;
- monitoring of body mass index;
- non smoking; and
- low or no alcohol consumption.

The graph opposite shows the proportion of Western Australian women who engage in health promoting behaviour. While it is useful to consider health enhancing factors individually, **47.9%** of women engage in two or more health enhancing behaviours (N.B. It is important to acknowledge that, when disaggregated by age, significantly different behavioural risk patterns emerge for women across the range of indicators.)

WA Women's Health Enhancing Behaviour



Source: WA Health and Wellbeing Surveillance System (March 2002 - June 2003)

Discussion

The relationship between a woman’s lifestyle choices and associated risks to health and wellbeing are firmly established. The majority of women in Western Australia lead healthy lifestyles which assist in the maintenance of health and wellbeing. Rates of physical activity and diet are two areas which may warrant further attention by Government in designing appropriate health interventions for women.

Women who have attended community forums on women’s health have expressed a clear preference for community based health services designed especially for women. Women’s health centres currently meet some of this need, although demand for such services remains high.

Indicator 28 – Illness, injury and hospitalisation⁷⁶

Minor illness

In 2003, arthritis, injury, asthma and osteoporosis were the most commonly reported long term health conditions for WA women.

Self-reported long term health conditions of women – March 2002-June 2003⁷⁷

Health Condition	Percent Female
Heart	4.1
Stroke*	1.3
Diabetes	3.9
Cancer	4.9
Mental health condition	8.1
Injury serious enough to require treatment within last 12 months	17.5
Asthma	10.7
Other respiratory condition	2.7
Arthritis*	23.8
Osteoporosis*	8.9

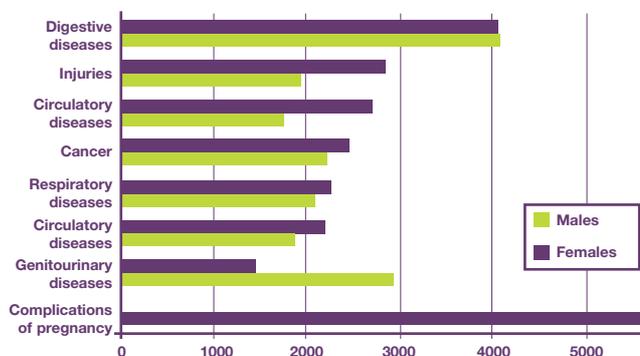
Source: WA Department of Health

Injury and hospitalisation rates⁷⁸

Digestive and circulatory diseases, and injury account for the majority of non pregnancy related conditions causing hospitalisation among women.

Studies indicate that women are **40%** more likely than men to be hospitalised due to self inflicted poisoning (mainly pharmaceuticals and/or in combination with other drugs).

Ranking of hospitalisations by condition and sex, WA 1995-2000



Source: WA Department of Health

Discussion

Consideration of the incidence of minor illness, injuries and hospitalisation for women provides policy makers with key information about health intervention strategies, and gender sensitive delivery of health care services.

The prevalence of degenerative diseases in women such as arthritis and osteoporosis is a significant community health issue. Strategies are required to address physical activity levels among women. Injuries (mainly low falls) are also of serious concern for women. Death from self inflicted injury among women is lower than for men, although hospitalisation rates are significantly higher.

Indicator 29 – Mental health and wellbeing

Level of psychological distress

In 2002-03, **8.1%** of WA women (compared with 5.8% of men) reported suffering from a current mental health condition⁷⁹.

There is also a high level of psychological distress in the community generally with about one third of the female population reporting psychological distress at moderate to very high levels. The highest proportion of women who report high or very high levels of psychological distress are aged 18-34 years (11.9%) while the lowest proportion are reported by women aged 65 and over (7.3%)⁸⁰.

Level of psychological distress, 2001

	18-34	35-44	45-64	65 and over	Women
Low (10-15)	62.2	66.6	72.3	74.1	68.2
Moderate (16-21)	25.9	22.7	18.2	18.6	21.6
High (22-29)	8.8	7.9	7.1	5.8	7.6
Very high (30 - 50)	3.1	2.8	2.5	1.5	2.6
Total	100.0	100.0	100.0	100.0	100.0

Source: WA Health and Wellbeing Surveillance System (March 2002-June 2003)

Use of medication

In 2001, **22.2%** of women used pharmaceutical medications to improve their mental wellbeing (12.3% prescription drugs). Usage was highest among women aged 35-64 years⁸¹.

Use of medication for mental wellbeing, 2001

	Women (000s)				
	Age Groups (Years)			Total	% of Total
	18-34	35-64	65 years+		
Used Medication					
Pharmaceutical medications					
Sleeping tablets or capsules	2.6	13.6	12.5	28.8	4.1%
Antidepressants for anxiety or nerves	17.5	28.2	13.2	59	8.5%
Other medications for mental health	np	np	np	np	1.4%
Total	20.3	40.2	24.8	85.3	12.3%
Vitamin or mineral supplements	17.6	35.2	np	59.6	8.6%
Herbal or natural medications	14.4	31.1	np	50	7.2%
Total (a)	40.9	80.7	32.6	154.2	22.2%
Did not use medications					
	187.6	279.8	73.5	540.9	77.8%
Total	228.5	360.5	106.2	695.1	100.0%

Source: ABS, National Health Survey

(a) Women may have reported more than one type of medication, therefore column may not sum to totals.

Discussion

Mental health is a key international and national health priority for women. The prevalence, level and treatment of psychological distress are important factors in individual, social and community health. Depression, eating disorders and suicide prevention are recognised as key areas for prevention in women's health.

Younger women experience the highest levels of psychological distress, although nearly **one quarter** of all women in WA use pharmaceuticals to alleviate mental health conditions, such as stress, anxiety and depression. The highest use of medication occurs among women aged 35-64 years, a significant period in the life course during which many women are engaged in the workforce and raising families.

Indicator 30 – Sexual and reproductive health

The number of births to teenage women in WA in 2002, was **18.6 per 1,000** women. The comparable figure for the State's teenage Indigenous women was **72.5 per 1,000** women⁸².

The prevalence of the two most common notifiable sexually transmissible diseases, per 100,000 WA women in 2003, was **226.3** for chlamydia and **65.4** for gonorrhoea, with rates among young women in the Indigenous community of concern⁸³.

In 2001, the caesarean section rate in WA was **27.6%**. The national caesarean section rate in 2001 was 21.9%⁸⁴.

In 2001, **57.3%** of women aged 18 years and over in the State reported having regular cervical cancer screening tests⁸⁵.

The participation rate of women in breast screening programs in 2003 in the target age group (50-69 years) was **57.0%**⁸⁶.

Participation in preventative screening programs, 2001

Cancer Screening – breast	%
Regular mammogram only	2.9
Regular mammogram and self/doctor examinations	23.8
Regular self/doctor exams only	45.1
No regular breast examination	21.4
Not stated	6.8
Total	100.0
Cancer screening – cervical	%
Has regular pap smear tests	57.3
Does not have regular pap smear tests	24.4
Never had a pap smear test	18.3
Total	100.0

Source: ABS, National Health Survey

Discussion

Teenage births are traditionally associated with increased maternal and foetal health risks. The World Health Organisation (WHO) suggests that national caesarean section rates should range between 5.0% and 15.0% of births.

The prevalence of sexually transmissible diseases among women is regarded as an important indicator of women's reproductive and sexual health.

Cervical cancer screening programs contribute to reductions in incidence and mortality. Evidence suggests that reductions in breast cancer mortality of up to 30% can be achieved through early detection breast cancer screening programs. To be most effective, 70% of women in the target age group (50-69 years) must participate in the program.

The incidence of caesarean section births for WA women is well above internationally accepted levels. Participation in cancer screening programs for women is below target. A range of community education programs focusing on prevention would enhance women's sexual and reproductive health.

Indicator 31 – Access to female GPs and satisfaction with the health care system⁸⁷

Profile of female GPs by state

Of all primary care practitioners in WA, **33.4%** are women (31.9% of all employed practitioners are female).

Satisfaction with hospital services

Generally there is a high level of patient satisfaction with hospital services in WA. In 2003, hospitals in the State scored an average of 79 out of 100 for overnight services and 80.6 for maternity services. Women rated the outcome of their hospital stays even more positively with 84.5 for overnight services and 80.6 for maternity services.

Table 12: Primary care practitioners: selected characteristics, states and territories, 1996 and 2001

Characteristic	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total
1996									
Number	7,215	4,800	3,398	1,840	1,791	565	379	196	20,185
% female	30.5	32.1	33.1	33.6	30.9	30.7	43.9	46.1	32.0
Average age	48.1	45.5	45.4	46.2	44.6	45.1	46.1	42.8	46.3
2001									
Number	7,522	5,612	3,455	1,957	1,830	615	420	259	21,671
% female ^(a)	33.7	35.3	35.7	36.5	33.4	26.4	46.8	50.0	34.9
Average age ^(b)	49.0	48.7	47.0	48.2	47.2	n.a.	48.8	44.0	48.3
% Increase in primary care practitioner numbers, 1996 to 2001									
	4.3	16.9	1.7	6.3	2.2	8.8	10.8	32.3	7.4

Source: Medical Labour Force Survey, 1996 and 2001

Patient satisfaction with hospital services

Service	Overnight Adult Women	Maternity
Access to hospital	69.2	N/A
Availability of people caring for you	88.6	87.6
Meeting personal as well as clinical needs	89.3	89.8
Continuity of care	77.3	82.6
Information & communication between hospital staff and you	82.7	84.0
Right to be involved in decisions about your care and treatment	68.5	74.8
The residential aspects of the hospital	66.2	67.5
Overall indicator of satisfaction	79.0	80.6
Patient rated outcome of hospital stay	84.5	80.3

Source: Consumer Evaluation of Health Services 2002-2003, WA Department of Health

Discussion

Women are major consumers in the health care system. Many women patients express a preference for a female medical practitioner, and this is especially relevant for women from culturally diverse communities, and those women living in rural and remote areas. A sustained increase in young women studying medicine has led to the current situation where around one third of all primary care practitioners in Australia are women. WA figures reflect this trend.

Patient satisfaction with hospital services is a key performance indicator in the WA health care system. Female patients' perceptions of quality of service provision in hospitals, particularly maternity services, are positive.

Technical Appendix

Unless stated the age range of the indicators will be primarily for women aged 18 years and over. However on occasion, due to classification reasons, it is necessary to include the 15-19 year age group (young women) in the final figure. For further breakdown of age ranges, please access original source.

OPPORTUNITY

Indicator 1 – Women as business leaders

Equal Opportunity for Women in the Workplace Agency (EOWA) data were chosen as the best available source as other survey data sets did not include a breakdown by state (Korn/Ferry, *International Boards of Directors Study in Australia and New Zealand 2002*, Pro:Ned, *Non-Executive Directors' and Chief Executives' Remuneration and Board Governance 2002*) or numbers for WA were too low to be of value (*2002 Australian Census of Women in Leadership*). Some non government organisations are covered by the EOWA Act.

Indicator 2 – Women in senior positions in public authorities

Office of Equal Employment Opportunity (OEEO) data were chosen as the best available source as it includes equity and diversity data from all public authorities in Western Australia, and additional EEO climate survey material from local government and public universities in Western Australia. It is produced annually.

Indicator 3 – Women in small business

These indicators do not necessarily imply sole autonomy in the workplace. Most often, women are not the sole proprietors of a small business. The majority of women engaged in small business work part time, in non employing businesses and in the types of businesses that reflect occupational and industrial segregation by gender.

Self employed figures are based on ABS Labour Force Survey, Quarterly, four quarter average to November 2003. For this purpose, self employed persons comprise employers, own account workers or contributing family workers.

Indicator 4 – Participation in post compulsory secondary education

While the current figure shows that 78.3% of female students remained in post compulsory education to Year 12, the figure does not reflect the additional students who undertook vocational education and training during the post secondary years.

The apparent retention rate is calculated by dividing the total number of full time female students in Year 12 by the number of full time female students at the commencement of secondary school (Year 8).

Indicator 5 – Women in elected positions in government

All data are taken from analysis of local government election results and updated members' lists on parliamentary websites.

Indicator 6 – Women on government boards and committees

The Department of the Premier and Cabinet is the agency responsible for monitoring implementation of gender equity on government boards and committees.

Indicator 7 – Women in unions

Information on gender breakdown of union leadership positions is uneven. The peak governing council, UnionsWA holds annual elections for the 220 Delegate positions on the Council. The size of a union's membership governs the number of delegates allotted.

WORKPLACE

Indicator 8 – Labour force participation

Participation and unemployment rates are based on original estimates, 12 month annual average.

Indicator 9 – Working arrangements

While many women prefer to work part time for family reasons, a number do so involuntarily and would prefer more hours. The proportion of women preferring more hours is indicative of the extent of involuntarily part time employment among women. Figures are based on original estimates, four quarter average to November 2003.

The term casual is measured in terms of survey respondents who self identified as casual employees.

Indicator 10 – Workplace training

Non traditional apprenticeships include all apprenticeship programs excluding hairdressing.

Indicator 11 – Pay equity

Full time ordinary time earnings was selected because it minimises the impact of choice (eg working part time, or working overtime) on the indicator. The headline indicator is based on the seasonally adjusted figure at November 2003.

Indicator 12 – Family friendly workplaces

There is very little data available on the availability and uptake of family friendly measures in the workplace. In addition, the ability for many workers to utilise such provisions depends upon the attitudes of supervisors and managers.

LAW

Indicator 13 – Women in the legislative process

A number of the figures quoted in the Law section are subject to a low base on which the proportion of women is calculated.

Indicator 14 – Proportion of ATSI Councillors

Unpublished data.

Indicator 15 – Women in the legal system

40% of judges in the Family Court are women (ie two of the five judges are women).

Indicator 16 – Women in the police service

The figures relating to the WA Police Service are based on a head count at 30 June 2001.

Indicator 17 – Women and crime

ABS figures relating to prisoners in WA are based on those women in custody at 30 June 2002.

FAMILY CARE

Indicator 18 – Family care provision

There is a significant lack of data with regard to carers in WA. Unless stated, the figures refer to women and men carers. As the burden of caring falls disproportionately upon women, it is assumed the results remain relevant.

Caring rates were calculated based upon primary and non primary carers due to the associated high standard errors of primary carer data when disaggregated by age and gender.

Due to the lack of data relating to the time spent caring for children in WA by their parents, national figures have been used.

The graph showing the distribution of sole parents by income range, does not show those sole parents on negative income or those who did not state their income. Caution should be used when considering the proportion of sole parents on low incomes (less than \$400), as the number of dependent children is not factored into the analysis.

Indicator 19 – Family care and the workplace

The indicators are based on ABS data. ABS regularly surveys users of child care, measuring demand and supply, and the reasons parents did or did not access child care.

Demand is price sensitive and may change in relation to cost and level of subsidy available. Informal and formal care can be regarded as potential substitutes. Demand relates to the overall relationship between estimated demand and supply in WA. The situation in different geographical locations or in relation to particular types of care may vary significantly.

SAFETY

Indicator 20 – Violence against women in the home, workplace and community

Violence in the Home and Community

This indicator is based on reported violent offences against women in WA by location. It does not measure all forms of violent offences. It should be noted 'home' refers to a dwelling (rather than the victims place of residence). Violence in the community is violence committed in places other than dwellings and workplaces. Some overlap between categories is possible - for example violence occurring in commercial premises may involve staff and be classified as 'workplace violence'.

Violence in the Workplace

This indicator is based on reported instances of violence in the workplace reported to WorkSafe WA. The data is issued by five yearly intervals. Incidence rates were calculated on the average adult female workforce over the five years the WorkSafe data relates to.

Domestic Violence

Hospital data

Data on the number of admissions to hospital where an individual has cited violence by a spouse is calculated against the resident female population to provide an incidence figure.

Supported Accommodation and Assistance Program (SAAP) data

The proportion of clients using supported accommodation due to domestic violence is calculated by reference to the total number of users of SAAP services.

Indicator 21 – Women and crime

Sexual Assault

Sexual assault data for indicators are based on reported crime and survey data produced by ABS. Some caution is required in comparing data sets due to differences in definitions and scope. For example, ABS survey questions on sexual assault are restricted to females over 18 years old, while police reports on sexual assault will record reports of sexual assault against all ages and genders.

Indicator 22 – Perception of safety in the home and on public transport

Data on perceptions of safety are drawn from several sources and involve different survey populations and measurement periods. Data for the perception of safety on public transport in Perth is drawn from an annual Transperth Survey.

^o ABS Child Care 2002 Cat 4402.0, Table 21

^f ABS Child Care 2002 Cat 4402.0, Table 21

^g ABS Child Care 2002, Cat 4402.0 Table 1

SENIORS

Indicator 23 – Health and wellbeing

Perception of ageing, health and wellbeing is a broad indicator of active ageing.

Indicator 24 – Family and community involvement

The use of voluntary work as a proxy indicator of active community participation is due to the nature of the types of voluntary work undertaken which include recreation/hobbies, welfare/community, arts/culture, education/training, environment/animal welfare and emergency services.

Indicator 25 – Older women and income

Labour force participation rates are based on original estimates, four quarter annual average.

HEALTH

Indicator 26 – Life expectancy and major cause of death

Data provided by Department of Health (DOH).

Indicator 27 – Lifestyle and associated risk factors

The DOH has a continuous data collection system which asks over 500 WA residents monthly about their health and lifestyle. The data are collected by a Computer Assisted Telephone Interview (CATI) Health and Wellbeing Surveillance. ABS data are more current (2001, compared with 2000 for DOH). Both ABS and DOH's survey data are self reported.

Indicator 28 – Illness, injury and hospitalisation

According to the ABS, in 2001, 80.2% of Western Australian women reported that they had one or more long term medical conditions. The most commonly reported conditions involved eyesight and related diseases (55.9% of all women); back pain/problems (21.7%); hay fever/allergic rhinitis (19.6%), arthritis (16.1%) and asthma (12.1%).

During the four weeks prior to the survey, 12.3% of Western Australian women experienced an injury and/or related event (ABS NHS 2001) and 20.3% had a serious injury requiring treatment in the 12 months prior to the survey (WA Health and Wellbeing Surveillance System March 2002 - June 2003).

Discrepancies exist between ABS and DOH data on self-reported long term health conditions among women. This is mainly due to the conditions asked about on the surveys and the survey method. Where comparisons are possible, the data are consistent.

Indicator 29 – Mental health and wellbeing

There are many other indicators of mental health and wellbeing. Suicide rates are generally much lower among women than men, while hospitalisation rates due to self inflicted injury are higher for women.

Indicator 30 – Sexual and reproductive health

The number of births to teenage women includes live births only.

The WHO report states with regard to caesarean section rates, 'a figure falling below 5% indicates that a substantial proportion of women do not have adequate access to surgical obstetric care and a rate higher than 15% indicates over utilisation of the procedure for other than life saving reasons, with unnecessary risk associated with any major surgical operation'.

For a breast screening program to be effective participants must visit twice within a 24 month period. The figure is indicative of those that did. While women over the age of 40 years are encouraged to participate in the program, the target age group is 50-69 years.

A range of other indicators were explored including fertility rates, average age of mother at birth of first child, use of contraception, breastfeeding rates and infertility treatment. Each of these for various reasons did not fulfil the validity checklist.

Indicator 31 – Access to female GPs and satisfaction with the health care system

A range of other factors was examined, including number and average cost of health care consultations, and private health care coverage.

The DOH has an ongoing continuous data collection system for health services in WA. Each year at least three different types of services are assessed. In 2002-2003, overnight patients, maternity patients and special groups were surveyed. The data collection is done on behalf of all WA public patients and information provided back to hospitals annually.

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List of Key Indicators

- Indicator 1**Women as business leaders
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- Indicator 3**Women in small business
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