



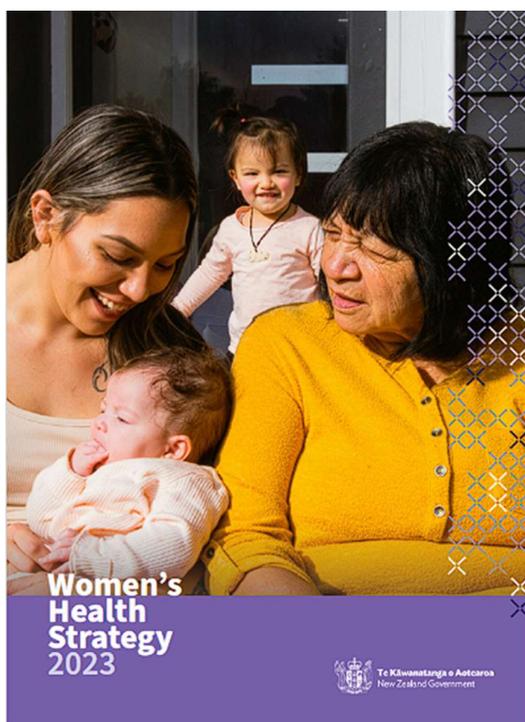
**Te Kāwanatanga o Aotearoa**  
New Zealand Government



MINISTRY OF HEALTH



# Summary of the Women's Health Strategy



**Published: March 2024**

# Before you start



This is a long document.



It can be hard for some people to read a document this long.



Some things you can do to make it easier are:

- read it a few pages at a time
- set aside some quiet time to look at it
- have someone read it with you to support you to understand it.



# What you will find in this document

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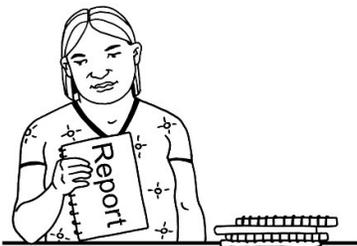
# About this document



This Easy Read document is a **summary** of a document written by Manatū Hauora – Ministry of Health.

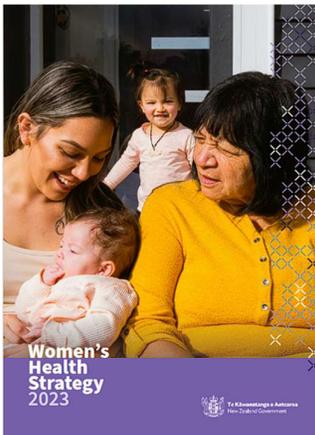


**We / our** in this document means Manatū Hauora – Ministry of Health.



A **summary** is:

- shorter than the full report
- tells you the main ideas.



This is a summary of the **Women's Health Strategy 2023**.



The **Women's Health Strategy 2023** says how the Government will work over the next 10 years to make the:

- health of **women** in New Zealand better
- **wellbeing** of women in New Zealand better.



In this Women's Health Strategy **women** means all women including:

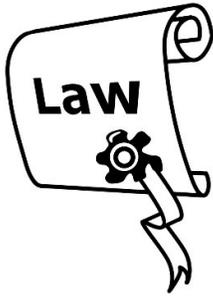
- trans women
- rainbow women
- disabled women
- women of all cultures.





**Wellbeing** means how well someone:

- feels
- lives.



The Women's Health Strategy 2023 is part of a group of documents written under the Pae Ora (Healthy Futures) Act 2022.

## Our vision



Our **vision** for the **future** is to make sure all women have **pae ora / healthy futures.**



A **vision** is like a **goal** for what we want the future to look like.

**Goals** are things we want to do.



The **future** means in the months / years to come.



**Pae ora / healthy futures** are futures where all women:

- live longer with good health
- have **equitable health outcomes** with men.



**Equitable** means that everyone has the same chance to have good health.



**Health outcomes** means how your health changes because of things like:

- care of yourself
- care of others
- if you can get to health services.





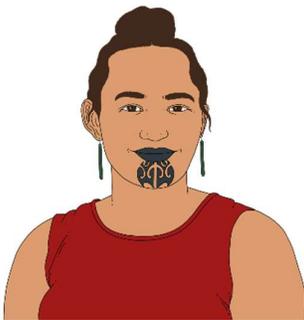
We need to look at all the things to do with the health of women like:

- having women as leaders in healthcare
- the health system meeting the needs / wants of:
  - o wāhine / women
  - o whānau / families.



We need to look at the rights of Māori wāhine like the right to:

- **тино rangatiratanga / self-determination** which means Māori get to decide what is best for them
- **mana motuhake** which means having choice and control over their health and wellbeing.





We also need to look at the right to access kaupapa Māori services.

## What people told us



To write the Women's Health Strategy we:

- talked to a lot of women about their health and wellbeing
- read a lot of research about the health of women.



Something we heard a lot about was **gender bias** having a bad effect on:

- the health and wellbeing of women
- experiences women have with health services.





**Gender bias** means that women may be treated:

- unfairly because they are women
- differently because they are women
- not as well as men.



Gender bias can happen because:

- healthcare used to look mostly at what men needed
- some people in healthcare think women should be treated differently than men.





Some women also have bad experiences because of things like:

- having a disability
- being part of the rainbow community.



We heard that women do not feel health services:



- listen to them
- understand them
- know how to take care of them well
- offer them support.





We also heard that **racism** is a big problem for Māori women.



**Racism** means nasty or unfair treatment of someone because of:

- where they come from
- their language
- their skin colour
- their religion / beliefs
- their **culture**.



**Culture** is a way of:

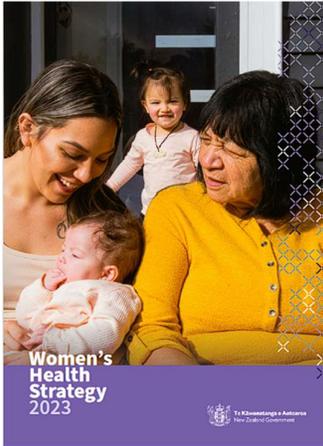
- thinking that a group shares
- doing things as a group.



Because of racism Māori women often have worse:

- health outcomes
- experiences in healthcare.

# Priority areas



The Women's Health Strategy has 4 **priority areas**.

A **priority area** is an important thing we need to look at first.



**Priority 1** is the vision for a health system that works for women.



We have some big goals like stopping things that are problems in the health system like:

- gender bias
- racism.



**Priority 2** is about making healthcare for the issues specific to women.

Women told us it can be hard for them to get healthcare for things like:



- **sexual health**
- **reproductive health**
- **menstrual health.**



**Sexual health** means healthcare for anything to do with sex like:

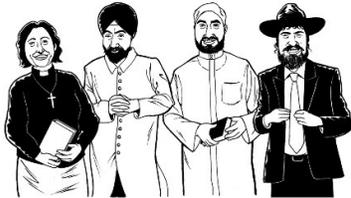
- keeping safe in relationships
- making sure the parts of your body used for sex stay healthy.



**Reproductive health** means healthcare to do with having children.



**Menstrual health** means healthcare to do with things like periods.



Many women say that they have been **shamed** when trying to get healthcare because of things like their:



- beliefs
- gender
- age
- disability.



**Shaming** is when people try to make someone else feel:

- bad about their choices
- embarrassed about their choices.



Some groups of women are shamed more than others when trying to get healthcare.



We asked disabled women about their experiences of trying to get:

- sexual healthcare
- reproductive healthcare.



We found that in healthcare for disabled women there:

- is a lot of shaming
- need to be changes like:



- o more research
- o more training for healthcare practitioners like doctors.





The Women's Health Strategy says there is a need for accessible:

- services for disabled women
- information about:
  - o sexual health
  - o reproductive health.



There is also a need for these services to be safe for disabled women.



**Priority 3** is about better outcomes for:

- mothers
- whānau / families of mothers
- future generations like:
  - o children
  - o grandchildren
  - o great grandchildren.



We have found that pregnant people are not always able to get the pregnancy care that they need.



There is not enough:

- early pregnancy care
- care for the whole pregnancy.



We have also found that sometimes the support someone gets after pregnancy is not the same as during their pregnancy.



Some groups have a harder time getting pregnancy care like:

- Māori people
- Pacific people.



This means that health outcomes for these groups after pregnancy are worse than for those who can get the pregnancy care they need.





One thing the Women's Health Strategy says needs to change is that all pregnant people will get:

- very good care from a provider they trust
- the right care during:
  - o early pregnancy
  - o the rest of their pregnancy
  - o childbirth
  - o after pregnancy when their children are very little.





This care needs to support:

- healthy **environments**
- safe family environments.



An **environment** means the different places people go in their lives like:

- where they live
- where they work
- where they go to do things like have fun.



To support this all programmes / services need to have lots of women from different backgrounds working with them.



This will make sure that they have care that is:

- safe
- accessible
- **gender affirming.**



**Gender affirming** care is healthcare that supports the **gender identity** of people getting healthcare.



**Gender identity** means what gender someone is like:

- male
- female
- non-binary
- transgender.



#### Priority 4 is about:

- living a good life
- growing old with good health.



#### Women have told us they want to:

- live longer with good health
- live in environments that support good health
- have better support for:
  - o health conditions
  - o life stages that happen like menopause.





To make sure women live a good life we need to:

- make sure there is early support for women who need more healthcare

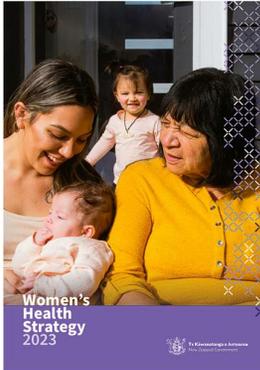


- find out how we can provide healthcare for:

- o life stages like menopause
- o health conditions that a lot of women have.



# More information



You can find the full Women's Health Strategy 2023 document at:

<https://bit.ly/49BPSok>



You can find more Easy Read information about 2023 strategies on the Ministry of Health website:

- New Zealand Health Strategy

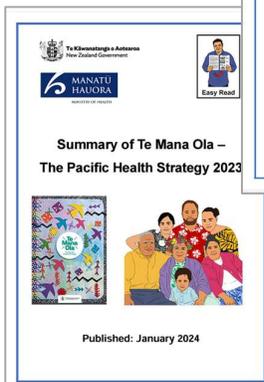
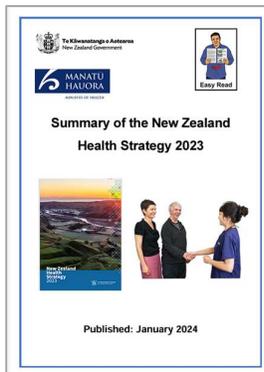
<https://bit.ly/3utQRlx>

- Pae Tū – Hauora Māori Strategy

<https://bit.ly/48nEPHq>

- Te Mana Ola – The Pacific Health Strategy

<https://bit.ly/49zvLac>





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