



**Submission to the
Tasmanian Women's Strategy
2022-2027**

April 2022

About Carers Tasmania

Carers Tasmania is the Peak Body representing the more than 80,000 informal carers (hereafter carers) in the state.

Carers Tasmania's vision is for an Australia that values and supports carers.

Our mission is to work to improve the health, wellbeing, resilience and financial security of carers and to ensure that caring is a shared responsibility of family, community and the government.

Our values drive everything we think, say, and do.

- **Carers first** – we listen to what carers need, commit to their desired action plan, and deliver results that matter most to carers
- **Care in all we do** – we care for our work, about each other, about Tasmania's family and friend carers, and the bigger world we all share
- **Integrity always** – we are transparent, act ethically, own when things don't go to plan and do what we say we will
- **Quality every time** – we don't accept 'good enough' because carers deserve our very best every time
- **Speed that matters** – we are agile and don't put off what can be done today.

These values represent how we engage with and serve carers, how we work with each other, and our commitment to the broader community.

Carers Tasmania encourages partnership with government and the health and community sectors to enhance service provision and improve the conditions for family carers through policy development, research and advocacy.

Carers Tasmania has offices in Moonah, Launceston and Burnie.

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Background

Carers Tasmania acknowledge the Aboriginal and Torres Strait Islander peoples as the traditional owners of the land of lutruwita/Tasmania and we pay our respects to Elders past and present. We acknowledge and support people of all genders, sexualities, cultural beliefs, and abilities and understand that carers in Tasmania, whilst sharing the common theme of caring for a family member or friend are diverse individuals with varying beliefs, experiences, and identities.

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Carers provide unpaid care and support to someone with disability, mental ill health, a chronic or life limiting condition, alcohol or drug dependence or who are frail or aged. Carers are predominantly family members, but may also be friends, neighbours, or colleagues.

Informal carers are not to be confused with paid support workers who are often called 'carers', with the difference being that support workers are fully employed and remunerated with all the benefits of employment. On the contrary, informal carers perform their caring duties without remuneration, other than minimal carer payments and allowances from the Australian Government. The term 'informal carers' also does not automatically include kinship or foster carers, unless they care for a child with disability, mental ill health or a condition as noted above.

In addition to representing carers through the Peak Body activities, Carers Tasmania provides support to carers living in Tasmania through its service delivery arm, Care2Serve. The Commonwealth Carer Gateway program is delivered through Care2Serve, as are other supports and services, such as Tasmanian Government's Home and Community Care program. The Carer Gateway program provides a range of services and supports for carers which are designed to build resilience, increase wellbeing, improve quality of life, and sustain carers to effectively continue their caring roles. The available supports include the provision of information, advice and referrals, holistic identification of carer strengths and needs through a carer support planning process, professional counselling, peer support, and coaching which aims to support carers in achieving specific goals.

In addition, Care2Serve have capacity to fund certain instances of planned, practical support services such as, but not limited to, in home respite, personal care, domestic assistance, and meal preparation. Care2Serve may also fund various items such as laptops to assist carers who are studying or trying to enter the workforce. Care2Serve also coordinate the provision of emergency support during instances where a carer may be unable to provide the care that they usually do, resulting from unexpected illness or injury for the carer.

Introduction

Carers Tasmania are grateful for the opportunity to respond to the Department of Communities' Discussion Paper (hereafter 'The Paper') on the draft Tasmanian Women's Strategy 2022-2027 ('the Draft Strategy')¹. We commend the commitment by the Tasmanian Government towards achieving gender equality and creating an inclusive Tasmania that will empower women and girls.

We note that the Draft Strategy is aims to provide the Tasmanian community with a meaningful and sustainable way to achieve gender equality throughout Tasmania.

The paper is built around four key areas, being:

1. Goals:
 - (1) cultural change,
 - (2) women's empowerment, and
 - (3) increased visibility and awareness of women's achievements, successes and needs.
2. Outcome areas:
 - (1) economic security,
 - (2) leadership and participation,
 - (3) safety, and
 - (4) health and wellbeing.
3. Principles for implementation:
 - (1) Establish **strong governance** arrangements to ensure agencies and organisations are accountable for achieving gender equality.
 - (2) **Assess the impact of gender** by understanding the different experiences of men and women.
 - (3) Put **people at the centre of your design** to understand the impact of your policy, program or service.
 - (4) **Engage and consult** with end users when developing policies, programs or services.
 - (5) **Evaluate** how your initiative helps to achieve gender equality and
4. Proposed actions:
 - (1) Gender impact assessment process
 - (2) Gender budget statement
 - (3) Evaluation framework
 - (4) Targets - Women on Boards Strategy
 - (5) Modern workplaces framework
 - (6) Supporting women's workforce participation
 - (7) Increasing women's participation in the building and construction sector
 - (8) Industry Liaison Officer – Women's Workforce Participation

Whilst we are strongly supportive of gender equality overall, this submission is focused on the questions asked in the discussion paper and written with a focus

¹ https://www.women.tas.gov.au/__data/assets/pdf_file/0022/210199/Tas-Womens-Strategy_wcag_5-April.pdf

specifically on female carers in Tasmania. We are hopeful that the overall strategy will be broad enough to support the diverse female population in Tasmania, but also include some targeted approaches to support vulnerable females such as Tasmanian females who are carers.

We highlight that Tasmania is home to a high proportion of carers and the majority of these carers are female, therefore making it critical that female carers are considered and included throughout the development and implementation of The Strategy. Caring roles are highly genderised, as illustrated by the following points:

- 80,100 carers in Tasmania, representing 15.5% of the Tasmanian population.²
- Of these carers, females accounted for 41,400 (51.7%) and males accounted for 38,000 (47.4%).
- Most informal carers in Australia are spouses, but adult children and particularly daughters are also often informal carers. Just under half (46.7%) of older people who receive support from an informal carer receive it from a spouse, and more than quarter (29.6%) receive that care from a daughter.³

We would like to acknowledge female carers in Tasmania for their enormous and ongoing contributions to their family members, friends and the broader Tasmanian community. We would also like to acknowledge TasCOSS for their support and collaboration upon this matter and their ongoing support for the Tasmanian community.

² Australian Bureau of Statistics (2021) 44300DO006_2018 Disability, Ageing and Carers, Australia: Tasmania, 2018. Released at 11:30am Wednesday 5 February 2020.

³ <https://www.carersaustralia.com.au/wp-content/uploads/2022/04/Final-Economic-impact-income-and-retirement-Evaluate-Report-March-2022.pdf>

Question 1: Do you have any comments about the proposed goals?

Overall, we are supportive of the proposed goals, but have some specific comments to provide.

Visibility and awareness:

We highlight the following paragraph as mentioned in the strategy on page 15:

“Awareness of women’s participation and successes in social, economic and community life inspires other women to follow in their footsteps. This is especially important for women who face barriers that may make this harder to achieve, including women with disability, Aboriginal women, transwomen and women from culturally and linguistically diverse backgrounds”.

With this paragraph in mind, we seek for women and girls who are carers to be specifically included in this priority cohort as they too face significant barriers. Carers are a vulnerable cohort who need regular identification and referral to appropriate support.

Suggested goal - Resources:

It is recommended to incorporate an additional goal that ensures the availability and accessibility of adequate resources and information, without which gaps will remain. If not, women will remain unaware of the opportunities and supports available. For cultural change to occur, there needs to be both an increase in visibility and awareness of women’s achievements, and also an increase in education, awareness and visibility of the supports, opportunities and resources available.

Question 2: Do you have any comments about the proposed outcome areas, including opportunities for strengthening the relationship between each area?

Economic security:

Economic security is a major issue, not only for women who are mothers, but also for the high proportion of females who undertake caring roles. Women often stop or reduce paid employment, to either raise a family or because of caring related duties, which has significant impacts such as a reduction in their super and or financial capacity.

In a report by Deloitte Access Economics: *'The Value of Informal Care in 2020'*, it was found that informal care in Australia was valued at \$77.9 billion in 2020.⁴

To build on these findings, The Carers Australia Network commissioned a further study by Evaluate the *'Caring Costs Us'* report⁵ which explored the cost of all informal care in Australia.

The *'Caring Costs Us'* report found that on average, carers in Australia will lose \$392,500 in lifetime earnings up to the age of 76 and \$175,000 in superannuation at the age of 67. Some carers will also lose substantially more depending on the period of time they spend in a caring role, and they age that they first become



⁴ <https://www2.deloitte.com/au/en/pages/economics/articles/value-of-informal-care-2020.html>

⁵ <https://www.carersaustralia.com.au/wp-content/uploads/2022/04/Final-Economic-impact-income-and-retirement-Evaluate-Report-March-2022.pdf>

a carer. The study also found that the Carer Payment is significantly lower than most weekly earnings for singles and couples in Australia and that the value of the Carer Allowance has significant decreased since it was first introduced.

This study provides a framework which can be used to explore the cost to female carers in terms of lost income and super across their time caring and it was found that on average, males who become primary carers will have their superannuation balance at age 67 reduced by about \$117,000 more than females who become primary carers. Similarly, their lifetime earnings to age 67 are reduced by about \$254,000 more than women who become primary carers.

It is vitally important for employed females to access the flexibility that they may require around their work, for either family related reasons or caring related reasons. Despite statistics showing that there are more female carers than male, there has also been an upward trend of more females participating in paid employment. The Value of Informal Care report by Deloitte, found that the participation rate of females in the workforce has increased from 43.3% in 1978 to 61.4% in 2020.⁶ To sustain the rate of female participation in the workforce, consideration of caring responsibilities must occur, teamed with adequate support options.

Currently, a national Inquiry by the Australian Productivity Commission is underway to examine the economic and social impacts of unpaid carers taking additional leave to care for a family member.⁷ The inquiry will explore the potential impact of amending the *Fair Work Act 2009*⁸ to provide employees with a minimum entitlement of unpaid carers' leave, if they are caring for older Australians living at home. This is a direct response to Recommendation 43 of the Aged Care Royal Commission.⁹

Leadership and participation:

More is required than just the opportunity to participate and undertake leadership opportunities. Women must be aware of available opportunities and be supported to access and succeed development programs. There may be other supports required



⁶ <https://www2.deloitte.com/au/en/pages/economics/articles/value-of-informal-care-2020.html>

⁷ <https://www.pc.gov.au/inquiries/current/carers-leave>

⁸ <https://www.legislation.gov.au/Details/C2017C00323>

⁹ <https://agedcare.royalcommission.gov.au/sites/default/files/2021-03/final-report-recommendations.pdf>

to make this possible and sustainable for women (eg child care, respite care, funding). In addition, social marketing campaigns need to be funded to extoll the benefits of education and the accessibility of the opportunities for women of all backgrounds.

Safety:

It is vital for women and girls to be safe at work, home and in the community. We acknowledge the commitment towards ensuring safety for women and girls in Tasmania through the implementation of the *Safe Homes, Families, Communities: Tasmania's action plan for family and sexual violence 2019-2022*¹⁰, however this document does not specifically address or support female carers who experience abuse from the person they provide care for. We respectfully acknowledge that there are instances where women experience abuse from the person that they care for, both unintentionally as well as intentionally, and there are a multitude of factors that may influence these experiences. Regardless of whether women choose to remain or end the caring role, they must be supported with appropriate and tailored support and resources that can assist in the reduction of violence in the caring role and its associated consequences.

Health and wellbeing:

As a result of their caring roles, most women experience poorer social, health and emotional wellbeing. It is often a side-effect of being isolated as a result of complexities of caring, the long hours, depth and breadth of caring activities, and the nature of the illness or disability of the person being cared for that directly reduces wellbeing. It is therefore true that most female carers do not have time to look after their own health and wellbeing or may not have the financial capacity to access activities that would positively contribute to improving wellbeing and resilience.

Routine identification and referral of female carers to appropriate support is a critical starting point to ensure that the health and wellbeing of female carers in Tasmania is supported. We are hopeful that the implementation of the upcoming Carer Recognition Legislation will further support this.

In addition, there must be adequate access to appropriate supports within the Tasmanian community to enable female carers to participate in activities which may benefit their health and wellbeing. Health and wellbeing must be looked at holistically and include a broad range of methods and low cost or free activities which have been proven to have health and wellbeing benefits.

Further suggestion:

To support women and girls in Tasmania to achieve these outcome areas, there must be additional education, information and resources implemented. Without this,

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https://www.communities.tas.gov.au/__data/assets/pdf_file/0030/133599/Safe_Homes_Families_Communities_Tasmanias_action_plan_for_family_and_sexual_violence_WCAG_27_June_V1.pdf

outcome areas will not be well achieved. To be 'empowered' they first need to be linked with the resources and support to enable this to occur. In addition, education on equality across all genders needs to be constant and consistent.

Question 3: What are your views about the proposed principles for guiding the implementation of activities for achieving gender equality?

We are supportive of the broad proposed principles guiding the implementation of activities but have provided some specific comments on aspects of the principles.

Engage and consult with end users:

The term 'end users' is not person-centred. We recommend that the principle be renamed '*Engage and consult with women*' when developing policies, programs or services. Unless they feel valued and respected, it is unlikely that women will participate in consultation, and so language is critically important.

Person-centred design and value of lived experience:

To enable successful implementation, person-centred co-design and valuing the lived experience of women across a broad range of scenarios is the appropriate methodology. We echo and support TasCOSS in their strong focus on this topic.

Question 4: Do you have any feedback on the proposed actions?

We recommend:

- (1) Rename the Gender Analysis Toolkit to the Gender Equality Toolkit
- (2) Rename the Gender Budget Statement to the Gender Equality Budget Statement. We believe that gender equality needs to be specifically named up.
- (3) The evaluation framework must specifically include consultation with females from a wide range of circumstances, including women who are carers.
- (4) We recommend for the Modern Workplaces Framework to also include information on things such as requesting flexible working arrangements, parental / carer leave. It is important that this specifically mentions females in caring roles and how to support them, not just females who have parental responsibilities. Some great resources can be found for working carers on the Carers Australia website.¹¹

¹¹ <https://www.carersaustralia.com.au/about-carers/carers-in-the-workplace/>

Question 5: Do you have any additional feedback?

We are thankful for the opportunity to provide the following additional feedback on the Draft Strategy.

Amend Page 6 – Snapshot:

We recommend for this section to mention the proportion of female carers here. Females are more likely to be carers (15.8 per cent of all females) than males (14.8 per cent of all males).¹² The proportion of female cares in Tasmania is higher than the national figure. Nationally, females are more likely to be carers than males, with 12.3% of all females providing care and 9.3% of all males.¹³

Related whole-of-government initiatives:

It is pleasing to witness that the Tasmanian Carer Action Plan 2021-2024 is listed as a relevant informing whole-of-government document for this strategy, but we also recommend that the Tasmanian Women's Strategy will also include reference to the soon to be implemented Tasmanian Carer Recognition Legislation as this will further support women and girls who are carers in Tasmania.

¹² https://www.communities.tas.gov.au/_data/assets/pdf_file/0023/173480/Supporting-our-Carers-Action-Plan-2021-24_-JULY-2021.pdf

¹³ Australian Bureau of Statistics 2018, Disability, Ageing and Carers, Australia: Summary of Findings: available: <https://www.abs.gov.au/statistics/health/disability/disability-ageing-and-carers-australia-summary-findings/latest-release#carers>