



A snapshot of women's health in WA

WA Women's Health Strategy 2013-2017

What WA women (16+ yrs) say about their health (2011-2014)⁽¹⁾



87%



do not eat five or more serves of vegetables daily

46%



do not eat two or more serves of fruit daily

41%



do insufficient physical activity

27%



are obese and 33% are overweight

21%



drink at levels that risk long term harm

Burden of disease

Top 5 causes in WA (2011)⁽²⁾

Women

1. Cancer and other neoplasms
2. Musculoskeletal conditions
3. Mental and substance use disorders
4. Cardiovascular diseases
5. Respiratory diseases

Men

1. Cancer and other neoplasms
2. Cardiovascular diseases
3. Injuries
4. Mental and substance use disorders
5. Musculoskeletal conditions

Women's cancers^(1, 3)

Breast cancer

Incidence (per 100,000) - 122.3 (2010-2014)

Cervical cancer

Incidence (per 100,000) - 7.3 (2010-2014)

Rate is 2.3 x higher for Aboriginal women compared to non-Aboriginal women (2005-2014)



Top 5 causes of death for WA women⁽⁴⁻¹⁰⁾

All women (2009-2013)



1. Ischaemic heart disease

12.8% of all cases



2. Dementia* (inc Alzheimer's disease)

9.8% of all cases
* 1.2 x higher than rate for men

3. Cerebrovascular diseases

8.2% of all cases

4. Lung cancer

5% of all cases

5. Breast cancer

4.2% of all cases



Aboriginal women (2004-2013)



1. Ischaemic heart disease*

11.2% of all cases
* 2.1 x higher than rate for non-Aboriginal women



2. Diabetes & impaired glucose function*

11% of all cases
* 10.9 x higher than rate for non-Aboriginal women

3. Cerebrovascular diseases*

5.5% of all cases
* 2.2 x higher than rate for non-Aboriginal women

4. Intentional self-harm*

3.9% of all cases
* 3.2 x higher than rate for non-Aboriginal women

5. Diseases of liver*

3.8% of all cases
* 7.5 x higher than rate for non-Aboriginal women



Notes

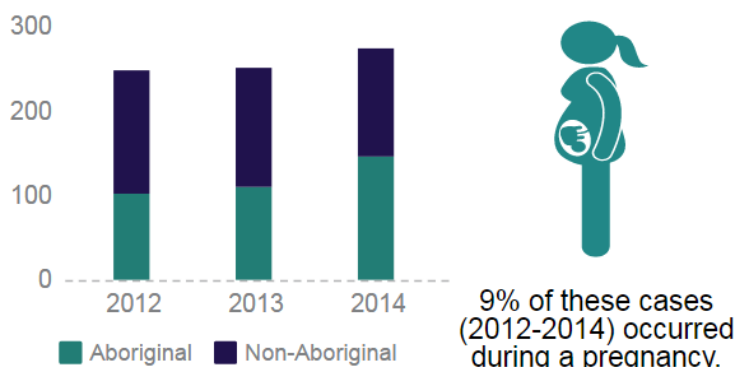
Information presented above is intended as a brief snapshot of women's health issues in Western Australia. It has been drawn from WA Health's HealthTracks Reporting system and Australian Burden of Disease Study 2011 with assistance from the Epidemiology Branch, Public Health Division. It is not intended to be exhaustive and is reflective of data available at the time of publication. Please interpret the results with caution and refer to original sources for further detail.

For further information, please contact Women's Health Clinical Support Programs - whcsp@health.wa.gov.au

Women's Health Strategy Priority Areas

Priority: family and domestic violence & sexual assault⁽¹¹⁾

Public hospital separations* for domestic violence related injury among females (all ages)



From 2012 to 2014, there were



156

hospital separations* for sexual assault related injury among women (all ages).

* Separation: An episode of care for an admitted patient, which can be a total hospital stay (from admission to discharge, transfer or death), or a portion of a hospital stay beginning or ending in a change of type of care (for example, from acute to rehabilitation).

Priority: mental health^(1, 9, 12-14)

63% of hospitalisations related to mood and anxiety disorders were for women (2010-2014).

9% of women (16+ yrs) report having high or very high psychological distress (2011-2014).

Depression affects up to 1 in 10 women during pregnancy and almost 1 in 7 women during the first year after childbirth.



Rate of self-harm hospitalisations for Aboriginal women is 2.6 x higher than the non-Aboriginal women's rate (2005-2014).



Rate of suicide deaths for Aboriginal women is 3.2 x higher than the non-Aboriginal women's rate (2004-2013).

Priority: chronic disease^(1, 15-17)



Diabetes complications accounted for 6.4% of potentially preventable hospitalisations for women (2010-2014).



Chronic obstructive pulmonary disease accounted for 7.8% and congestive cardiac failure accounted for 7% of potentially preventable hospitalisations for women (2010-2014).



23% of women (16+ yrs) report having been diagnosed with arthritis (2011-2014).



Hospitalisations due to accidental falls was significantly higher in women 65+ years compared to men in the same age group (2010-2014).



Being overweight or obese increases risk of developing long-term conditions like cardiovascular disease, high blood pressure and Type 2 diabetes.

Priority: sexual health^(18, 19)



Rate for sexually transmitted infections in women is 1.3 x higher than the men's rate (2010-2014).

The rate of sexually transmitted infections in Aboriginal women was 7.7 times higher than the non-Aboriginal women's rate (2005-2014).

Notes

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