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Jan Rivers

Email: fyi-request-22000-b6905b37@requests.fyi.org.nz
Ref: H2023021293

Tēnā koe Jan

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) to Manatū Hauora (the Ministry of Health) on 5 March 2023 for information regarding the Women's Health Strategy.

Before responding to each part of your request I would like to provide you with some relevant context regarding the Women's Health Strategy.

The Women's Health Strategy is one of six Pae Ora health strategies mandated by the Pae Ora (Healthy Futures) Act 2022. The other Pae Ora strategies are the New Zealand Health Strategy, the Hauora Māori Strategy, the Pacific Health Strategy, the Health of Disabled People Strategy, and the Rural Health Strategy. These strategies, together with the Health Sector Outcomes framework, Government Policy Statement on Health and the New Zealand Health Plan, set future directions for the Health System. The experiences and aspirations of rainbow communities are being considered across all Pae Ora strategies, including the Women's Health Strategy.

The Women's Health Strategy will set the strategic direction for improving women's health. The scope is broad, and includes misogyny and discrimination against women, experiences and conditions that affect women differently or disproportionately, and social determinants of health that contribute to gender inequity.

The health and wellbeing needs and experiences of gender diverse people will be reflected in the Women's Health Strategy where they intersect with those of women. This is inclusive of trans women, as well as some people who may not identify as women. Gender diverse people's health and wellbeing needs and experiences will also be reflected in the development of the other Pae Ora strategies as appropriate.

From a public health perspective, we know that both sex and gender are determinants of health. It is important that we acknowledge where trans women and other women have shared factors that shape health care access and health outcomes. Examples of this include gender bias, and social determinants of health such as income, housing, and experience of family violence and sexual violence.

Manatū Hauora notes that an individual's health needs and experiences may be shaped by different aspects of a person's identity including sex and gender, ethnicity, disability and socio-

economic status. To avoid losing this nuance, the strategy will not treat women or diverse populations of women as one homogenous group.

Each part of your request is responded to below in turn:

Please can you provide information used or generated by the Ministry over the past 2 1/2 years to include:

papers that explain the medical evidence of these 'same health issues'.

any lists of parallel health issues created by the Ministry to demonstrate the benefits of including male people as women in a women's health strategy,

Two documents have been identified within scope of this part of your above requests relating to 'same health issues' and lists of parallel health issues. The documents are outlined in the table in Appendix 1 of this letter. Where information is withheld, this is outlined in the Appendix and noted in the document itself. Where information is withheld under section 9 of the Act, I have considered the countervailing public interest in releasing the information and consider it does not outweigh the need to withhold at this time.

academic and research resources used by the Ministry to identify these 'same health issues'

Manatū Hauora has access to a large range of research databases and has engaged with a wide range of literature while building the evidence base for the Women's Health Strategy. Manatū Hauora does not have a record of all research and academic resources used over the past 2½ years to explore issues around sex, gender and health. Therefore, your above request for academic and research resources is refused under section 18(g) of the Act.

While we do not have a record of all the academic and research resources that have been used to explore issues around sex, gender and health over the past 2½ years, we can provide some examples of relevant reports. For example, we note that the paper *Sex and Gender Equity in Research* by Heidari et al. (2016) provides clear definitions of gender and sex. You can read this here: <https://researchintegrityjournal.biomedcentral.com/articles/10.1186/s41073-016-0007-6>.

Further, we note that the Royal Australian and New Zealand College of Obstetricians and Gynaecologists identified trauma from sexual violence and intimate partner violence as a priority for women, non-binary and trans people in their Flourish: Women+ Health Summit report to inform the Women's Health Strategy <https://ranzcog.edu.au/news/flourish-women-health-summit/>. The 2019 Counting Ourselves report also indicated that rates of sexual violence for trans people, including trans women are very high. You can read this at: <https://countingourselves.nz/2018-survey-report/>.

Another source of information on these issues is the 2019 Counting Ourselves report, which indicated high rates of psychological distress among gender diverse people. While psychological distress rates for cis-gender women are lower than those of trans women, the New Zealand Health Survey shows that women are significantly more likely to report psychological distress than men. You can view this at: https://minhealthnz.shinyapps.io/nz-health-survey-2021-22-annual-data-explorer/ w_11d48cde/#!/home.

The Breast Cancer Foundation NZ website provides some information on breast cancer in rainbow communities, including in trans women. You can read this at: <https://www.breastcancerfoundation.org.nz/breast-cancer/types-of-breast-cancer/breast-cancer-in-the-lgbtq-community>.

external engagement with New Zealand organisations such as feminist, rainbow/queer and transgender organisations who supplied information about the 'same health issues'.

One document has been identified within the scope of your above request for external engagement. As the Ministry has not completed a formal analysis of information gathered through engagement on the Women's Health Strategy, this document has been withheld in full under section 9(2)(f)(iv) of the Official Information Act. I have considered the countervailing public interest in releasing the information and consider it does not outweigh the need to withhold at this time.

During targeted engagement on the Women's Health Strategy, we heard about the importance of considering the needs of trans women in the design of mental health services and campaigns, in provision of social supports like emergency housing. Our stakeholders also noted that trans women, and cis-gender men, can be affected by breast cancer.

Please provide any papers that addressed the 'counterfactual' ie any materials of the kind above that addressed concerns that including people in a women's health strategy by gender rather than sex raised risks for the effectiveness of the strategy such as women who do not identify as women being left out of the strategy or services intended for natal women having to be directed towards men who identify as women."

Manatū Hauora has not produced any papers or briefings on this topic. Furthermore, as mentioned above, Manatū Hauora does not have a record of all research and academic resources that are engaged with. Therefore, your above request for 'counterfactual' materials is refused under section 18(g) of the Act. However, Manatū Hauora is aware of conversations among members of the public that disagree with the inclusion of gender diverse people, including trans women, in the Women's Health Strategy. The Ministry's position is that all people are entitled to the health and wellbeing support that they need to enjoy the best standard of health care they can, and an inclusive Women's Health Strategy is one tool to achieve this goal.

I trust this information fulfils your request. Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Manatū Hauora website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Nāku noa, nā



Steve Waldegrave
Acting Deputy Director-General
Strategy, Policy and Legislation | Te Pou Rautaki

Appendix 1: List of documents for release

#	Date	Document details	Decision on release
1	6 April 2022	Briefing: Initial Advice on a Women's Health Strategy: Scope, process and timelines (HR20220479)	Some information withheld under the following sections of the Act: <ul style="list-style-type: none">• Section 9(2)(a) and;• Section 9(2)(f)(iv) -to maintain the constitutional conventions that protect the confidentiality of advice tendered by Ministers and officials.
2	21 October 2022	Women's Health Strategy – Director General of Health Response to Fern Hickson	Some information withheld under section 9(2)(a) of the Act to protect the privacy of natural persons.
3	27 January 2023	Response to media request from NZ Doctor – Gender diverse people in the Women's Health Strategy	Released in full.