



## Indigo Shire Women's Sexual and Reproductive Health Snapshot

**Indigo Shire** is a local government area in the Hume region of Victoria covering an area of 2,044 square kilometres (Indigo Shire Council, 2016). There are currently 8,097 women in the area, including 108 Aboriginal and Torres Strait Islander women (Murray Exchange, 2016). This snapshot portrays the sexual and reproductive health outcomes experienced by these women.

**Sexual and reproductive health** is a significant issue for all women across the lifespan (Women's Health Victoria, 2009). **Sexual health** encompasses emotional, physical, mental and social wellbeing in relation to sexuality, including the right to respectful, enjoyable and safe sexual relationships free of coercion, discrimination and violence (WHO, 2006). **Reproductive health** suggests people can enjoy a responsible, satisfying and safe sex life with decision-making control over their reproductive choices (WHO, 2006).

### Births

In 2016 the number of live births in Indigo was 131 (Australian Bureau of Statistics, 2016).



The total fertility rate indicator\* per 1,000 women was 1.94, similar to Australia's total fertility rate of 1.8 babies per 1,000 women (Australian Bureau of Statistics, 2016).

Amongst women **aged 15-19** in Indigo a rate of 5.2 babies per 1,000 women were born in 2015. This is **lower** than the Hume region rate of 12.5 & the State average rate of 9.5 (Victorian Department of Health and Human Services, 2015).

*\*The average number of babies born to a woman throughout her reproductive lifetime (Women's Health Atlas, 2016).*

**Unplanned Pregnancy** is experienced by over **50%** of Australian women (Marie Stopes International, 2008). Not every pregnancy is unwanted, however many women need to decide what the best option is for themselves and their family based on their personal circumstances (Children by Choice, 2017).

Women in the Hume region can access bulk billed medical terminations in [Wangaratta and Wodonga](#). Surgical termination can be accessed in Albury or Melbourne. Cost, privacy and access were found to be the greatest barriers faced by rural and regional women who choose to access surgical terminations (Victorian rural women's access to family planning services, 2012).



### Young People & Safe Sex in the Hume Region

**5.3%** of 12-14-year-old students reported that they had sexual intercourse (Adolescent community profile, 2010).

**29.4%** of 15-17-year-old students reported that they had sexual intercourse (Adolescent community profile, 2010).

**58.9%** of these students practiced safe sex by using a condom (Adolescent community profile, 2010).

**94.6%** of sexually active adolescent females have used contraception to avoid pregnancy (Adolescent community profile, 2010).

**Chlamydia** is a major cause of infertility for women and is responsible for **50%** of sexually acquired pelvic inflammatory disease cases, which can lead to infertility (Better Health Channel, 2017). In 2017 there were **21,026** cases of chlamydia diagnosed amongst Victorians (Notifiable Infectious Diseases, 2017).

In Indigo, the chlamydia rate per 10,000 persons was 11.2 for females and 7.25 for males. For **women** this is **lower** than the Hume region (15.5) and State average (19.4) rate. Likewise, the **male** rate is **lower** than the Hume region average (9.4) and State average (13.1) rate (Notifiable Infectious Diseases, 2014).

### Contraception

In Indigo Shire the 2015 IUD insertion rate per 1,000 women aged 15-24 was 2.6 (based on Medicare claims). **This rate increased in older cohorts**, where 7.6 and 8.8 women per 1,000 aged 25-34 and 35-44 respectively had an IUD insertion. **This rate decreased for women 45+**, with 3 women having the IUD insertion (Women's Health Atlas, 2016).

**The Implanon was more popular across all ages**, with a rate of 18 per 1,000 women aged 15-24 accessing this form of contraception (based on Medicare claims). **This rate increased among women aged 25-34** with a rate of 20.1 per 1,000, **and decreased for women aged 35-44 and 45+**, with a rate of 9.6 and 3.7 respectively having the Implanon insertion (Women's Health Atlas, 2016).

Long acting reversible contraception has higher efficiency rates than condoms and the contraceptive pill, however uptake remains low (Children by Choice, 2017). The oral contraceptive pill is the most commonly used form of contraception amongst Australian women (Family Planning NSW, 2015).

**Privacy** was found to be the most significant barrier to young people purchasing condoms in rural and regional areas (Victorian rural women's access to family planning services, 2012).



## Cervical Screening

**70%** of women who develop cervical cancer did not have regular Pap tests (Cancer Council Victoria, 2017). Pap screening data from 2014-2015 showed **69.6%** of eligible women in Indigo (aged 20-69 years) had a Pap test. **This is higher than the Hume region average of 64.0% and the State average of 60.5%** for the same time period (Victorian Cervical Cytology Registry, 2014). The Pap test has been replaced with a 5-yearly human papillomavirus (HPV) test for women aged 25 to 74 (National Cervical Screening Program, 2017).

**Sexual Offences** are acts and intent of acts against another person of a sexual nature that are non-consensual. This includes rape, sexual offences against children, indecent assault and other sexual offences (Women's Health Atlas, 2015). **1 in 5** Australian women have been coerced into unwanted sex (Visser, Smith, Rissel, Richters & Grulich, 2003).

In 2017 **25** females in Indigo reported a sexual offence. This was a rate of 15.7 women per 10,000, which is **similar** to the Hume region (15.5) and State (13.7) average rates (Crime Statistics Agency Victoria, 2016). Research has found most incidents of family and sexual violence go unreported, therefore this is likely an underestimate (Phillips, 2014).

### References

- Australian Bureau of Statistics. (2016). *Births*. Retrieved from <http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/3301.0Main%20Features42016?opendocument&tabname=Summary&prodno=3301.0&issue=2016&num=&view=>
- Better Health Channel. (2017). *Pelvic inflammatory disease (PID)*. Retrieved from <https://www.betterhealth.vic.gov.au/health/healthyliving/pelvic-inflammatory-disease-pid>
- Crime Statistics Agency Victoria. (2016). *Reported Incidents of Sexual Offences by LGA and sex, January 2016 to December 2016*. Retrieved from <https://www.crimestatistics.vic.gov.au/crime-statistics/latest-crime-data/family-incidents>
- Children by Choice (2017). *Unplanned Pregnancy in Australia*. Retrieved from <https://www.childrenbychoice.org.au/factsandfigures/unplannedpregnancy#r1>
- Department of Education and Early Childhood Development. (2010). *Adolescent Community Profile – Indigo Shire*. Retrieved from <http://www.education.vic.gov.au/about/research/Pages/reportdataadolescent.aspx>
- De Visser R O, Smith A M, Rissel C E, Richters J & Grulich A E. (2003) Sex in Australia: Experiences of Sexual Coercion in a Representative Sample of Adults. *Australian and New Zealand Journal of Public Health*, 27(2), 198-203.
- Family Planning NSW. (2013). *Reproductive and sexual health in Australia*. Retrieved from [http://familyplanningallianceaustralia.org.au/wpcontent/uploads/2015/09/rshinaust\\_book\\_webedition\\_1.pdf](http://familyplanningallianceaustralia.org.au/wpcontent/uploads/2015/09/rshinaust_book_webedition_1.pdf)
- Indigo Shire Council. (2016). *Community Profile*. <http://www.communityprofile.com.au/indigo>
- Marie Stopes International Australia. (2008). *Real choices: women, contraception and unplanned pregnancy*. Retrieved from <http://www.mariestopes.org.au/research/australia/australia-real-choices-key-findings>
- Murray Exchange. (2016). Population Characteristics. Retrieved from <https://www.phnexchange.com.au/goulburn-valley>
- National Cervical Screening Program. (2017). *More accurate. Less often*. Retrieved from <http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/cervical-screening-1>
- Phillips, J. (2014) Domestic, family and sexual violence in Australia: an overview of the issues. Parliamentary Library.
- Regional Cancer Council Victoria. (2017). *Cervical cancer and Pap test statistics*. Retrieved from <http://www.papscreen.org.au/forthemedia/cervical-cancer-pap-tests-statistics>
- Victorian Department of Health and Human Services. (2015). *Consultative Council on Obstetric & Paediatric Mortality & Morbidity; ABS Estimated resident population as at 30 June 2015*. Retrieved from <https://www2.health.vic.gov.au/hospitals-and-health-services/quality-safety-service/consultative-councils/council-obstetric-paediatric-mortality>
- Victorian Cervical Cytology Registry. (2014). *2014 Statistical Report*. Melbourne, Australia.
- Victorian rural women's access to family planning services: survey report August 2012 / Rural services of the Women's Health Association of Victoria - Ballarat, Vic. Rural services of the Women's Health Association of Victoria, November 2012
- Vic.Health. (2014). *Infectious diseases surveillance in Victoria*. Retrieved from <https://www2.health.vic.gov.au/public-health/infectious-diseases/infectious-diseases-surveillance>
- Women's Health Victoria. (2009). *Sexual and Reproductive Health*. Retrieved from <http://whv.org.au/what-we-do/sexual-reproductive-health>
- WHO. (2006). *Defining sexual health: Report of a technical consultation on sexual health, 28–31 January 2002*. World Health Organization.
- Women's Health Atlas. (2016). *Sexual and Reproductive Health Priority Health Area, Gendered Fact Sheet*. Accessed March 2018 from <http://victorianwomenshealthatlas.net.au/>