



HACSU

Health & Community
Services Union

HACSU Women's Plan

About HACSU

The Health and Community Services Union (HACSU) is Victoria's only specialist union for the disability, mental health, and alcohol and other drugs industries. We represent the industrial, political, social and professional interests of over 10,000 Victorian workers.

HACSU's members work across public and private mental health, disability and AOD. We work to improve our member's working conditions and the services they provide to vulnerable Victorians.

We're a strong and growing union, and our links into the sectors we cover give us a complete look at the health and community services systems in Victoria. Our members have unique insight into what's needed to deliver safer services for both workers and consumers.

HACSU was founded in 1911 and our long history has shown that when working people come together, we win. We're proud to be a diverse and vibrant union with members dedicated to fighting and achieving major wins in their jobs, their workplaces, and their sectors.

Our plan for women.

HACSU is the only specialist union for mental health and disability professionals in Victoria. We have long campaigned for gender equality to improve women's working lives. We are uniquely placed to lead the way in achieving progressive change; the industries we cover are primarily dominated by women, with more than 65 per cent of our membership identifying as female and 72 per cent being under 35. Our members also provide care and assistance to women from all other workforces.

Often, it feels as though women cannot win. We are either told to suck it up, harden up or toughen up.

We are told we were asking for it, even by definition of our workplace. We are overlooked for promotions or projects. We are ashamed of bleeding, cramping, miscarrying, aborting, or going through menopause. We are terrified of taking personal leave for these reasons, especially when we have to use that leave to take care of children or ageing parents. When we eventually take personal leave for ourselves, we are told that "our heart isn't in our work". We are afraid to speak up about bullying, violence, and sexual harassment, and when we do, we are often targeted. There are still workplaces that make women feel like a problem when they request flexibility for child-caring responsibilities. We are still earning and retiring with less; worryingly, the demographic that is now most likely to become homeless are women over 55.

This is not good enough. In 2022, the women of Victoria demand more. All women and girls are entitled to respect, dignity, and bodily autonomy. We have progressed in seeking that recognition through parental leave (primary carer), sick leave, and carers leave. However, these entitlements still imply that a woman's primary role is looking after children, ageing parents, or both — that a woman's role is predominantly caring. Whilst that may be true to a certain extent, there is more to women. We have enormous potential to change the workplace, legislation, and the way people live. We can contribute more to the workplace, lead organisations and corporations, and inspire change.

People work during the day as that is when human bodies function best. We have lunch breaks to refuel at a particular time because of our bodily needs. We have toilets available because they are essential to how the body works. The workplace is modelled around the human body. Still, it does not consider the specific needs of the female body and the participation of women in the workforce. Women have worked the best we can with the current system, but now is the time for change.

Attempting to rectify structural, generational change for working women is multifaceted, arduous, and often contradictory. Gender equality must begin in the workplace to ensure that women are afforded full financial equity, support to report bullying and harassment and are granted the flexibility to take care of their children and their reproductive health and wellbeing. We believe that such changes will encourage women to not only remain in the workforce but to



Kate Marshall, HACSU Assistant State Secretary

reach higher levels of leadership and to engender a more profound sense of solidarity between working women.

HACSU and its members applaud the progressive steps taken by the Andrews Labor government to address gender equity issues. In 2020, history was made when the Gender Equality Bill 2019 (Vic) passed through the Victorian parliament, representing historic progress towards breaking down gender barriers in the workplace. In 2015, the Victorian Government established a Royal Commission into Family Violence after the tragic death of Luke Batty. As a result, The Orange Door program was launched — a free service for those impacted by family violence who need extra support in the caring of children. The government has also implemented essential policy measures in schools, namely providing free pads and tampons to help reverse period poverty and have launched a respectful relationships program to teach the importance of respect and consent. The state government has started investing in endometriosis research in the health space and has most recently announced a publicly funded IVF program. It is unsurprising to note that the Cabinet and all State-based boards are 50 per cent women, and recently, Victoria has adopted a model of affirmative consent, which will also make the act of stealthing illegal.

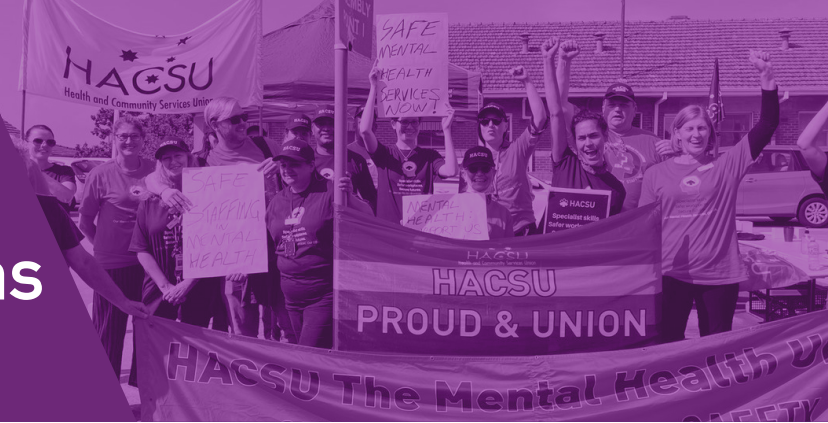
This is a government that has demonstrated repeatedly that they are committed to gender equity, and we hope that this plan amplifies and adds to the already significant work done by the Andrews Government.

Meaningful change for working women begins in the workplace and is amplified by courageous policymakers. These changes are more critical than ever, particularly as we as a community grapple with the COVID pandemic and the challenges this crisis brings. We are leaning on healthcare workers and the caring industries more than ever. Given that women primarily dominate these sectors, industrial change and economic equity must be encouraged, celebrated, and implemented.

Kate Marshall
Assistant State Secretary

A handwritten signature in black ink, appearing to read 'K Marshall'.

HACSU's Industrial Wins and Campaigns



To date, HACSU has campaigned hard to include progressive clauses in our enterprise agreements to assist with achieving gender equity in the health and community services sector. We believe that employers should adopt these clauses in all enterprise agreements, and state and federal governments should implement them as policy.

Higher wages and better working conditions

The last two years have been some of the most challenging years on record for HACSU members and the people they support. Every step of the way, HACSU members have risen to the challenges ahead of them, showing grit, determination, and compassion. They have continued to look after our state's most vulnerable — often in full PPE, working overtime, spending time away from friends and family, and risking their own health and safety.

Over the pandemic, many have labelled these workers “healthcare heroes” and “essential workers” — titles that they have always held for us. While we welcome this newfound appreciation for this critical work, our priority is ensuring that appreciation translates into better wages and conditions for the disability, mental health, and alcohol and other drugs workforces. We believe this must also be extended to those working in the aged care, childcare, and community services settings such as public and social housing services.

HACSU is calling on the Fair Work Commission (FWC) to order pay increases for these workers in female-dominated industries to achieve this. As called for by the Federal Labor Party in 2018, the Fair Work Act must be changed to force the Commission to consider pay equity as central to targeting the gender pay gap. A Pay Equity Panel must enshrine equal remuneration principles and policies with a unit dedicated to research and rollout.

For far too long, HACSU members and other caring industry sectors have been undervalued and underpaid, with the average woman working in health care, social assistance and education earning approximately \$30,000 less than the average man working in the most male-dominated industries of construction and manufacturing.

The caring sectors are riddled with instances of labour hire, an emerging gig economy and industries that have not been afforded the opportunity to bargain effectively for better working conditions. This results in weakened industrial rights, burnout, unsafe working conditions, and mass job insecurity. The childcare, AOD, aged care, disability, social and public housing, and mental health workforces must be afforded the opportunity to bargain effectively. Short, fixed-term funding for community services must be halted to address the gender pay gap.

Our health and community services heroes deserve more.

Reproductive health and wellbeing

Our claim:

- Five days paid leave for employees experiencing reproductive health matters for the purpose of attending and recovering from specialty appointments and treatments
- The availability of flexible work arrangements for those experiencing reproductive health matters.

In this clause, Reproductive Health matters include In Vitro Fertilisation (IVF) and other forms of assisted reproductive health services (for example, IUD or hormone injections/replacements), or specialty treatment for conditions that cause excessive pain or excessive bleeding.

While not exclusively experienced by women, reproductive issues impact significantly on women in the workforce. Women are often forced to utilise paid and unpaid personal leave because of reproductive health issues. Access to paid reproductive health leave for all employees experiencing reproductive health issues increases workforce participation, reduces the gender pay gap and reduces the superannuation gender pay gap at retirement.

For many women, small adjustments to working arrangements that assist in accessing treatment or alleviating symptoms associated with reproductive issues can improve women's working lives without the need for employees to take extra leave. For example, a reasonable and flexible start time could allow persons undertaking hormone or IVF treatment to manage nausea/vomiting without losing an entire day to personal leave.

These measures enhance gender equality by removing the stigma associated with reproductive health issues while also increasing female participation in the workplace.

"I endorse this plan, and it is extraordinary that in 2021 that we are still campaigning for women's reproductive health to be recognised in the workplace. I can't help thinking if men got pregnant, we would not be having this conversation."

- Fiona Patten MP
Leader of the Reason Party

Pregnancy loss leave

Our claim:

- Employees who experience pregnancy loss after 20 weeks are entitled to access paid parental leave entitlements under their applicable enterprise agreement.
- Employees are entitled to a period of paid pregnancy loss leave if the pregnancy comes to an end before 20 weeks' gestation.
- An employee, and their partner, are entitled to 5 days of paid pregnancy loss leave if the pregnancy ends between 1 and 10 weeks
- An employee, and their partner, are entitled to 10 days of paid pregnancy loss leave if the pregnancy ends between 10 weeks and 19 weeks and 6 days

Currently, most women in the public sector have access to the full provision of parental leave when they lose a pregnancy after 20 weeks. We are grateful that such provisions are in place. However, an estimated one in five women lose a pregnancy in the first 20 weeks of their pregnancy, and the trauma and impact of such a loss can have debilitating effects.

Losing a pregnancy before ten weeks can have a massive effect on a person's mental health, compounding the physical trauma of the loss. Accordingly, our claim is five days of paid leave to ensure that both the person who has lost the pregnancy and their partner can support each other through that trauma.

Losing a pregnancy after ten weeks also affects mental health; however, the physical trauma may be more significant as a worker may require surgeries, meaning more recovery time and potentially more financially stressful for the person/s experiencing the loss.

Pregnancy loss leave, like reproductive leave, prevents employees from going to work without having the proper time to grieve and process their loss. It also allows women to attend any medical appointments and procedures following the miscarriage. Without these leave entitlements, individuals are forced to inappropriately use up their personal leave entitlements in instances that should not be considered as "illness or injury".

Gender equity

Our claim:

- A commitment that the Employer will work collaboratively and consult with Employees and HACSU to identify, support and implement strategies designed to eradicate the gender pay gap, gender inequality, gendered violence, and discrimination
- A commitment that the Employer will support a dedicated HR role and elected Health and Safety Representative to deliver workplace health and safety with a gendered lens inclusive of education, training and designing responsive and flexible workplace health and safety arrangements.
- A claim process regarding systemic gender equality issues.

Our claim seeks to enhance gender equality while simultaneously ensuring compliance with the principles espoused in the Gender Equality Act 2020 (Vic) or Workplace Gender Equality Act 2012 (Vic). Including a claims process to address issues of gender inequality provides a direct mechanism for employees and unions to improve the working conditions for women.

Parental leave

Our claim:

- More parental leave for both primary and secondary caregivers.

Our claim seeks to ensure that parents can have more time at home with their child/ren. HACSU has secured four extra weeks for primary caregivers and one additional week for secondary caregivers in Public Sector Mental Health – meaning that primary caregivers have 14 weeks, whilst secondary have two weeks.

Our next campaign will seek to amalgamate the primary and secondary streams of parental leave. This will ensure both men and women have access to the same amount of parental leave and eradicate the notion of the “secondary carer”. Such change is vital to enhance gender equality by providing opportunities for men to play an equal part in parenting responsibilities. It will also remove any hesitations associated with hiring or promoting women whilst facilitating greater female workforce participation.

Workplaces such as Maurice Blackburn and KPMG have already successfully adopted these clauses in their agreements. We are eager to see this change adopted in the mental health and disability sectors and across all public sector agreements in the future.

Lactation and express breaks

Our claim:

- Employees cannot be discriminated against for breastfeeding or chestfeeding, or expressing milk in the workplace.
- An Employee who wishes to continue breastfeeding or chestfeeding after returning to work from a period of parental leave or keeping in touch days, may take reasonable time during working hours without loss of pay to express breast milk for a nursing child each time such Employee has need to express the milk, or breastfeed the child within the workplace.
- Paid lactation breaks are in addition to normal meal and rest breaks provided for in this Agreement.
- Employers will provide a comfortable place, other than a bathroom, that is shielded from view and free from intrusion from co-workers and the public, which may be used by an Employee to express breast milk or breastfeed a child in privacy.
- Appropriate refrigeration will be available in proximity to the area for breast milk storage. Responsibility for labelling, storage and use is with the Employee.

Lactation breaks are critical to ensure women can participate in the workplace following the birth of their child/ren. Workplaces must allow women to express milk during work hours to ensure that babies are fed and assist with milk supply and avoid breast engorgement. Therefore, workplaces should ensure that women have a safe, comfortable, and private place to breastfeed or express milk and that this is considered paid time. Such measures ensure that women do not suffer further disadvantages due to their predominant role as carers and are also consistent with the prohibition under the Sex Discrimination Act 1984 (Cth) against discrimination on the grounds of breastfeeding. The CPSU (Community and Public Sector Union) has successfully won this clause in the Victorian Public Service Enterprise Agreement 2020.

Family violence leave

Our claim:

- A commitment that the employer recognises that employees sometimes face situations of violence or abuse in their personal life that may affect their attendance or performance at work.
- The employer is committed to providing support to those employees and will provide leave to those who are experiencing, or being threatened with, violence due to physical and/or psychological injury, as well as to attend counselling appointments, legal appointments or proceedings and all other activities related to, and as consequence of, family violence.
- The employer is not to provide any personal information, including but limited to, personal address, phone numbers, email address, working hours etc to anyone unless pivotal to the working engaged in by the employee.

This clause is available to all employees including full-time, part-time, and casual and includes a commitment from the employer to implement temporary or ongoing changes to assist in the employees working life including and not limited to:

- I. temporary or ongoing changes to their span of hours or pattern or hours and/or shift patterns;
- II. temporary or ongoing job redesign or changes to duties;
- III. temporary or ongoing relocation to suitable employment at a suitable location;
- IV. a change to their telephone number/s and/or email address to avoid harassing contact;
- V. any other appropriate measure including those available under existing provisions for family friendly and flexible work arrangements

Employees are also eligible to utilise this clause in conjunction with existing leave provisions to assist a person experiencing family violence.

An Employee experiencing family violence will have access to 20 days per year of paid special leave for medical appointments, legal proceedings and all other activities related to family violence (this leave is not cumulative but if the leave is exhausted, reasonable consideration will be given to providing additional leave and will not be unreasonably refused).

This leave will be in addition to all existing leave entitlements and may be taken as consecutive or single days or as a fraction of a day and can be taken without prior approval.

Prior to the Royal Commission into Family Violence in Victoria, experts estimated that the total cost to the Victorian community and broader economy was \$918 million, with the cost to individuals and their families being \$2.6 billion and the total cost to the state \$5.3 billion. Far too often, women experiencing domestic violence are excluded from the workforce due to family violence's ongoing and associated effects. This clause centres on a commitment from HACSU and our Employers that we will do everything possible to ensure that women can continue to

thrive in the workplace, even in the face of family violence. We believe that flexibility, leave, and financial status issues should never preclude a woman from fleeing violence.

Violence and abuse cut across lines of income, class, and culture with long-term effects on women's mental health. Violence is still the leading contributor to death, disability, and illness for women.

Family violence is a health issue.

Superannuation reform

Our claim:

- Superannuation to be paid into superannuation funds on the day workers earn it
- Superannuation to be paid on both employer and government parental leave payments, as well as unpaid parental leave

Women face a greater risk of experiencing poverty in their old age due to low superannuation accumulation during their working life. This is partially attributable to the traditional role of women as carers and the impact of parental leave and part time working arrangements impeding superannuation growth. Our claim seeks to improve women's superannuation balance by expanding the categories of leave that attract superannuation and changing the frequency of superannuation being paid. We estimate that changing the superannuation payments from quarterly to fortnightly could result in individuals having up to \$8,000 more in their accounts come retirement.

Going forward

Whilst we have successfully achieved the inclusion of some of the above claims (or various iterations of these claims) in enterprise agreements to date, the fight is unfortunately not over. HACSU will continue to fight for the widespread inclusion of progressive claims in all agreements, covering all workforces.



Domestic violence and sexual assault perpetrated against women costs Australia \$13.6 billion each year, and that figure is likely to rise if extra steps are not taken.



Workplace sexual harassment has a high cost. As well as having a devastating and profound impact on individuals, it's estimated that sexual harassment cost the Australian economy \$3.8 billion in 2018.



72% of Australians over 15 have experienced sexual harassment in their lifetimes.

23% of women and 16% of men said they had been harassed at work.

Domestic and family violence is the number one cause of homelessness in the country, where almost 50 percent of those experiencing homelessness are women, often accompanied by children.



From May through to November 2021, casual jobs made up over 60% of new jobs and women filled 62% of those jobs.



45% of women report that dealing with menopause led them to consider retiring or taking a break from work, due to severe symptoms.



Urgent boost to publicly-funded women's health

Australian women may live longer than Australian men, but they are not healthier. Over half of our population are women. However, research shows that although women live longer, they are more likely to live in poverty and with a chronic, disabling disease.

In May 2021, Federal Health Minister Greg Hunt announced a \$353.9 million investment in women's health over four years, including support for mental health, endometriosis, breast and cervical cancer and reproductive health. While we welcome this overdue investment, we know that states are under extreme pressure placed on the system by the Covid-19 pandemic to deliver services. Without a meaningful investment from the federal government, states will not be able to deliver.

During research for HACSU's Reproductive Health and Wellbeing initiative, we discovered that Victorian women have to wait three years on average to see a publicly funded specialist. That is three years of pain, excessive bleeding, and other symptoms without a diagnosis or access to treatment. The widespread inability to access women's health specialists has contributed to the fact that, on average, it takes 6.5 years to diagnose endometriosis. That is not good enough.

Unsurprisingly, women make up the majority of consumers in the healthcare system. Yet, overall, our public and private systems are not designed to cater to women's unique needs. When coupled with chronic underfunding of women's health services, Australia's inherently patriarchal health care system makes it undeniably clear we need an urgent and ongoing funding boost.

Of serious concern to union women is how these complexities further harm marginalised communities. It's estimated that Indigenous women live up to 20 years less than non-Indigenous women. Women with a disability are over-represented in institutional care, experience higher rates of poverty, and experience higher rates of difficulty in accessing health services. Refugee women have higher instances of co-occurring chronic disease, reproductive health issues and mental health issues, while experiencing difficulty accessing publicly funded health services.

It is estimated that the health care cost of domestic violence for 2021-21 will cost \$445 million, on top of an already underfunded sector. Urgent reform is necessary and well overdue.

The healthcare system in Australia—and therefore healthcare policy—is often written to be blind to gender. However, this only reinforces the idea of masculinity as the 'default' and femininity as 'other', despite evidence that even medical conditions experienced by all genders are experienced differently by men and women — from physical conditions like heart attacks to psychological conditions like ADHD. Women and men experience these conditions uniquely and denying policies specific to women's experiences is a blight on our healthcare system.

While we welcome the introduction of policies such as publicly funded IVF access in Victoria, we are concerned that Australia has no national women's sexual and reproductive health strategy to guide research, policy, program development, and evaluation appropriately.

In Victoria, abortion is legal, however many are attached to denominational organisations. Recently a national survey of general practitioners conducted by the Australian Women's Health Network found that 40 per cent are not confident in their knowledge of their state or territory's abortion laws. There is no Medicare item number for a rebate on medical abortion. We are thrilled to see progressive investment and reform politically in this space. Still, we must ensure that women can access publicly available services where and when they need them the most.

Australian women deserve more. By investing in women's health, Australia invests in women in the workplace.

New reforms and industrial tools



Sexual harassment leave

The Respect@Work Report, authored by Sex Discrimination Commissioner Kate Jenkins, shed light on the prevalent and pervasive nature of workplace sexual harassment. It demonstrated what women have known for decades: that reform is urgent and necessary in every workplace, at every level, and in every industry.

12 of the 55 recommendations require legislative change. While the federal government has only enacted six, the Fair Work Commission now has new powers to stop sexual harassment in the workplace. The Sex Discrimination and Fair Work (Respect at Work) Amendment Act 2021 amends the Fair Work Act 2009 to include changes:

- To allow a worker who is sexually harassed at work to apply for a Fair Work Commission order to stop the sexual harassment.
- The ability to give the Fair Work Commission the power to stop sexual harassment following a single instance of harassment.
- Making sexual harassment in connection with an employee's employment a valid reason for dismissal.

These are welcome, long overdue changes — however serious concerns remain about their efficacy, particularly for women in casual employment, labour hire, and the gig economy.

It's unsurprising that sexual harassment is worse in workplaces with low union density and sectors with casualised workforces. For decades, women have been over-represented in these industries, leading to the entrenchment of poor working conditions and an ingrained fear of speaking up.

Economic insecurity should never prevent a person from speaking up about sexual harassment. However, a recent survey by the Australian Council of Trade Unions found that 54.8 per cent of 9600 respondents had experienced sexual harassment at work — from customers, clients, workers, and, for 38 per cent, a supervisor. Only 27 per cent of those who experienced sexual harassment made a formal complaint.

40 per cent told no one.

Gender inequity in the Australian labour market is of grave concern. Some state governments have made bold moves, such as Victoria's introduction of Gender Equity laws. However, unless women are afforded economic equity in the form of full or part-time employment with a range of leave provisions and entitlements, the fear of speaking up and reporting will continue. 61.8 per cent of the 2.3 million Australian workers reliant on minimum wages are women.

Real change begins with industrial and economic equality.

To address the fears of negative consequences and a lack of faith in the complaint processes, we believe that a special leave entitlement must be enshrined in policy, enterprise agreements and awards for sexual harassment leave. Of course, addressing the high instances of insecure

"For generations, women have been expected to remain silent about the injustice they have faced. No more. Sexual harassment must be brought out of the shadows, and it starts with our leadership recognising that enough is enough. Change needs to support women in their intersectional diversity across race, class, sexuality, age, and disability.

Gender equality cannot be achieved by handing down crumbs. It requires an unapologetic commitment to reform the systems that build and uphold the barriers to begin with. This report does just that."

- Yasmin Poole

Award-winning speaker, writer and youth advocate.

work and stamping out the gig economy is of immense importance across our movement. In the meantime, a leave entitlement must be enacted to assist our most marginalised workforces when they have experienced sexual harassment.

Far too often, members tell us that they are unable or unwilling to report harassment because they are casual. As a union, we have had multiple occurrences of casuals forcing themselves to return to a workplace after a sexual harassment incident due to fear or economic pressures.

Workers are put through this trauma, and many will not report harassment as:

- There is no confidence that the complaints process would be confidential
- There is no faith in the complaint process
- There is a fear of negative consequences for the complainant

It is unfair to put workers through this, leaving them in precarious circumstances — financially, physically, and mentally. Fundamental changes to workplace reporting and legislative amendments will take considerable time to filter down to workplaces — so we must start now. We believe a 5-day leave provision must be enshrined in all workplace agreements and awards, in the first instance. This leave will give employees the ability to look after their mental health when reporting harassment, and allows employers time to mitigate any further risks to the complainant and address the incident. Much like our Reproductive Health and Wellbeing clause and Family Violence clause, these industrial measure will assist working women to be empowered to stand up for themselves and their needs without fear of negative consequences or economic disadvantage.

At present, the Victorian Government is trialling paid sick leave for casual employees in response to the spread of COVID-19 in insecure workplaces. This trial will provide up to 5 days of sick leave or carer's leave at minimum wage rates. Should this trial be successful, it should be legislated to assist our gig economy, labour hire and casual workforces to be empowered to report sexual harassment.

Women working in these highly casualised workforces have no industrial power to address or report sexual harassment. The Victorian Government Inquiry into the Labour Hire Industry and Insecure Work demonstrated that far too often, workers are routinely denied fundamental employment rights, and evidence of abuse, violence, sexual harassment, and excessive working hours are rampant. To assist these workers, we need urgent reform to leave provisions to protect women and ensure they are not subjected to economic disadvantage.

Organisational reform and confidential workplace reporting

Countless reports, submissions to inquiries and surveys have revealed that, overall, women are unwilling to report instances of harassment as they have no confidence in the reporting mechanisms. To combat this, HACSU is calling for the following policies to be implemented in all workplaces:

1. A dedicated people and culture manager and health and safety representative who carries the portfolio of workplace safety with a gendered lens

This role should be in all workplaces and should be tasked with implementing all workplace health and safety and workplace policy with a gendered lens. Duties should include making recommendations on workplace design, flexible working arrangements, workplace health and safety issues, issues relating to menstruation and menopause and investigating instances of bullying, harassment, and sexual harassment. A key part of this job should be an obligation to report to the CEO and their commitment to reporting the incident, investigation proceedings and outcome to the board.

This should also include training and education for workplaces to assist working women of all ages in continuing to thrive when issues relating to menstruation, menopause and reproductive health occur. Recently reported in Circle In's report 'Driving the Change', when asked to define what was most challenging about their experience while working in menopause, almost half of the women surveyed reported a drop in confidence, and 83 per cent said that the stress of juggling work during menopause harmed their work.

Almost half of the respondents considered retiring due to severe menopausal symptoms, with 28 per cent surveyed going through with it. 42 per cent did not retire due to financial reasons.

1 in 8 women surveyed left the workforce due to their symptoms.

2 in 8 would if financial reasons did not hamper them.

A recent survey by The Victorian Women's Trust found that 86 per cent of respondents wished they had better access to flexible working arrangements to cope with menopause. Developing a framework of flexibility for all Victorian workplaces and a robust education program for employees is urgent. It would go a long way to ensuring that working women are not isolated, embarrassed, or forced to leave the workforce earlier than they should.

2. The introduction a disputes panel in all workplaces

The Health and Community Services Union recently won a clause in the Public Area Mental Health Enterprise Agreement to implement an independent disputes panel to investigate workplace disputes. The panel comprises an independent chair, a representative from the

employer and a representative from the relevant trade union. Our view is that this would provide working people with another mechanism to report sexual harassment, in line with surveys conducted by the Australian Council of Trade Unions which found that unionised workplaces are far safer for women.

To have strong union involvement in this space is essential to ensuring all Australian workplaces are safe.

3. A policy commitment to encourage health and safety representatives and the establishment of designated working groups in all workplaces

Workplaces with elected health and safety representatives and designated working groups are safer, are more productive, and encourage employees to speak up about unsafe work conditions. Recently, occupational health and safety training providers have included a specific gendered violence refresher course for HSRs (Health Safety Representative) to combat instances of gendered violence, harassment or bullying in workplaces. This training should be mandated for Health and Safety Representatives and should be included in all workplaces as a non-negotiable policy to give workers another avenue to report safely.

4. Insertion of a gender equality panel and training for all Fair Work Commissioners

While we acknowledge the positive steps taken by the Federal Government in expanding the scope of the FWC, we believe it is imperative that a gender equity panel be established within the Commission to tackle complex issues of sexual harassment and gendered bullying in the workplace and that training be given to all commissioners in line with the Respect@ Work Report.

Equitable access to addiction treatment and rehabilitation

Every year, around 500,000 Australians seek assistance for addiction but are unable to access help. Current policy settings negatively impact working people, with long wait times, long treatment times, and costs that are impossible for the average person. Workers are forced to choose between keeping their job, re-mortgaging their house or withdrawing their superannuation — or simply not getting the healthcare they need.

Of particular concern is the lack of rehabilitation options for mothers, with a shortage of services that accept children. Women are more likely to be a primary caregiver, which leaves mothers sitting on long waiting lists to access help.

Women-only services that can accept children benefit women, by tackling the addiction as a family unit. There is a national shortage of these services — e.g. in Western Australia, of 16 state-run rehabilitation services, only three can take children.

Overall, women face more difficulties than men in accessing rehab services. According to Professor Nicole Lee, women often have history of trauma, high prevalence of common mental health issues such as anxiety or depression, and face economic barriers to accessing treatment.

The Victorian union movement is working to open a worker-led rehabilitation, outpatient, and outreach service in partnership with government and publicly-funded rehabilitation services. This program is based on Foundation House, the successful NSW union-initiated rehabilitation service.

Offering a service that has a 28-day inpatient program, with extensive ongoing outpatient support, will ensure that working people can retain their employment and build community, all while receiving life-changing treatment. The NSW service has had great success, expanding into toolbox talks, health and safety training, and union delegate training. Funding has been secured via enterprise agreements, and industry donates to the service as they see ongoing benefits.

We aim to build on what Foundation House NSW has created. Ideally, we will be looking to open four services in Victoria after a successful trial period, with one specifically for women and children who need crucial mental health and addiction support.

Collaborative, community-based services with the support of the trade union movement will reduce addiction-related harms for women while ensuring that they stay employed and have continuous support via their workplace.

Leave to receive treatment for addiction

A key barrier to women accessing treatment for addiction treatment is a lack of leave entitlements. Women often must use personal leave for their reproductive health and wellbeing, as well as having caring responsibilities. Specific leave provisions need to be added to enterprise agreements and awards as standards to assist women in seeking addiction treatment.

Modelled on the CPSU's Leave to Attend Rehabilitation clause in the Victorian Public Sector Enterprise Agreement, we believe that a leave provision must be added and available for all working people after passing probation to attend rehabilitation. This clause should be a 28-day minimum and should accrue further leave with years of service. We see this as a harm-reduction measure that makes economic sense for business, community, and family.

At present, policy settings cost the Australian community approximately \$55 billion annually due to the knock-on effects of addiction. It is economically responsible to invest in addiction leave, equitable rehabilitation, and harm reduction measures as every \$1 invested saves the community \$27.

Giving working women and mothers and equitable, affordable and accessible options to undertake treatment is crucial.

Housing and employment

In the 2018-19 period, 1 in 57 Victorians accessed a government funded homeless service. This is a devastating number, but it's also one that is highly likely to underestimate the extent of the issue. Approximately 24,000 Victorians and 116,000 Australians will be homeless tonight.

These Australians cover many demographics; young people, mothers and children escaping domestic violence, people with a disability, older people, and community members grappling with mental health and addiction.

According to the Victorian Inquiry into Homelessness, demand for services has exceeded availability of support, with 112,919 Victorians seeking assistance in the 2018-19 period. Of those who sought assistance for short-, medium-, or long-term accommodation, most could not be assisted by government or not-for-profit services due to them being over capacity.

The Victorian Inquiry into Homeless noted:

- 76 per cent could not be provided long-term housing
- 62 per cent could not be provided transitional accommodation
- 32 per cent could not be provided crisis accommodation.

The trade union movement applauds the Andrews Government's record \$5.3 billion investment to build more than 12,000 public housing dwellings with projected job creation at 43,000. This move will represent a 10 per cent increase in the overall Victorian social housing stock.

However, despite this landmark investment, this will not ensure that the state will meet the national average of social housing as a percentage of total dwellings. For Victoria to reach the social housing average, it is estimated that the state would need to build at least 3,400 dwellings each year until 2036.

As a movement, we know that the housing crisis has become more urgent due to the direct and indirect economic impacts of the COVID-19 pandemic. Most worryingly, women are the most disproportionately affected due to insecure work, family violence and a lack of superannuation in retirement.

Worryingly, women over 55 years old are the fastest-growing demographic of homelessness in

Australia.

We need viable ways forward to ensure that those seeking housing are afforded the opportunities for employment, studies or apprenticeships, while also receiving mental health support.

Our plan provides solutions highlighted in the Victorian Inquiry into Homelessness, specifically providing housing for women and housing with employment opportunities attached.

\$3 billion has been committed by the Victorian state government to tackle domestic violence. However, five years after the Royal Commission into Family Violence, 26,000 women and children are being turned away from housing services each year, and police reports are at an all-time high. There are severe shortages in emergency and long-term housing options for victims of family violence, with some waiting times up to eight weeks.

In the year leading up to December 2020, police attended 92,521 family violence incidents. Each night, 66 women and 55 children spend the night in motels due to a lack of available housing. 51,000 Victorians became homeless due to family violence in the 2019-20 period.

We believe this must be addressed collaboratively with the government, businesses, NGOs, and trade unions as a matter of urgency.

Collaborative partnerships to provide affordable housing with job training attached are crucial to filling this gap. Women deserve the dignity of housing with employment opportunities connected in a supportive setting.

"Flat Out supports criminalised and imprisoned women and we wholeheartedly support this plan.

Women need secure jobs that pay enough to be economically independent and care for children and elders. A secure, liveable income and a roof over our heads throughout our lives is a very basic ask, but so many women don't have them.

The result can be poverty, family violence, homelessness and acts of survival that put women and children at the mercy of the criminal legal system. Caring work at home and in employment, whoever performs it, should be recognised, respected, and properly remunerated in our economy.

We are proud to support HACSU's work on advancing the rights of women as workers"

– Karen Fletcher, Executive Officer
Flat Out

Implementation of all Recommendations from the Royal Commission into Institutional Responses to Child Sexual Abuse

Three years ago, as part of the national apology to victim-survivors of child sexual abuse, Prime Minister Scott Morrison pledged to open a National Centre for Sex Abuse Survivors.

We are still waiting.

In May 2021, the Prime Minister announced a national strategy to prevent child sexual abuse at a cost of \$146 million. Unfortunately, \$100 million of this investment has gone to law enforcement with no mention of the centre for survivors.

As a matter of urgency, we believe that this centre must be funded and done so in every state.

This would be another mechanism for working women to utilise when facing present or historical sexual abuse. It is imperative that this centre, as promised and in line with recommendation 9.9 of the report, is actioned. While we welcome all programs that include prevention, it is our view that a centre like this needs to be focused on survivors to give another avenue of seeking confidential and wrap-around support.

Furthermore, we are demanding that every State and Territory implement every recommendation of the Royal Commission. We are concerned that loopholes still exist in criminal legislation across the country. For example, in Queensland and Tasmania, the Acts still have not included provisions that make it a crime for those with caring responsibilities such as teachers and priests to groom, coerce or have sexual relations with 16- and 17-year-olds. Loopholes like this are present across the country. Given the evidence of the psychological impact such cases have on women and children, we must act upon them.

Trauma can be a key indicator that precludes women from employment. Any intervention that can be safe for women to address these harms is an urgent, positive investment.

Not doing so further engenders harm and a culture of not speaking up.

Free and Universal Early Childhood Care and Education

There are approximately 2.6 million families with dependent children under 15 years old in Australia. For decades, Australian families have struggled with ECEC costs consuming a high proportion of the household income, with it being inaccessible for working families. In many instances, it is cheaper for women to not return to their workplace rather than pay for childcare. Our view is that the economic benefits of free early childhood care and education involve much more than encouraging women back to the workforce. This shift also needs to be expanded to include better working wages and conditions for those who provide this care and recognise that this care fosters incredible educational outcomes for our young people.

We must fund these services across the board. They must include culturally and linguistically diverse learning environments and cater to children who identify as having a disability or a mental health condition.

Childcare reform has been an urgent matter for years, and the COVID pandemic has exacerbated this. Parents are reporting much higher levels of emotional distress and isolation, with Melbourne University finding that in 2020, employed parents with a primary school aged child are four times more likely to be in higher mental distress relative to 2017 statistics. Furthermore, the consequences of 'the pink recession' mean that women are far more negatively impacted due to job losses and reduced hours.

The positive mental health and confidence of parents, particularly women who are still considered the primary caregiver, is an urgent endeavour that should be front of mind for all of Australia. The 'motherhood penalty' narrative has merely been perpetuated by COVID but has always been present when discussing the economic disadvantage of mothers and workplace discrimination. Many international studies have found that mothers are viewed as 'less competent' and 'less committed' due to child-caring responsibilities. The reality is that affordable childcare and early education are significant barriers for working mothers to return to the workplace and rise within the ranks of a workplace.

We contend that a positive way forward would be to ensure that State and Federal governments:

1. Make childcare and early education universal and free to ensure equitable access.
2. Raise the wages and conditions of those working in these sectors to solidify this as a long-term career path.
3. Scrap primary and secondary caregiver provisions to level the playing field.
4. Introduce workplace measures with flexibility, working from home arrangements and on-site childcare

Progressive childcare, early education, parental leave, and flexibility are not a luxury. They are a right.

Summary

1. Industrial Reforms

- Reproductive health and wellbeing
- Pregnancy loss leave
- Gender equity
- Parental leave reform
- Lactation and express breaks
- Family violence leave
- Superannuation reform

2. Funding boost to publicly funded women's health

3. Sexual harassment leave and stamping out insecure work

4. Organisational change and confidential reporting mechanisms

5. Access to rehabilitation treatment and addiction leave

6. Equitable housing and job retraining

7. Implementation of recommendations of the Royal Commission into Institutional Responses to Child Sexual Abuse

8. Free and universal childcare and early childhood learning

"So, what is our aspiration and what do we want it to look like? Well, we want it to be fair. We want a working environment for all women that fosters and rewards application, ability, integrity, and that is shielded from discriminatory pay and practices. We need to pay attention to our whole needs, including our health and wellbeing and we need recruitment, promotion and the procurement of contracts that is free from bias. We need to chip away at the underlying bias in our culture that reinforces our perception that women are in fact less capable of most things."

– Fiona McLeod AO SC

