



Women's Health	
Party:	Australian Greens
Summary of proposal: The proposal consists of 4 components and would start from 1 July 2022. Component 1 would conduct a one-off national survey of maternity health experiences in public hospitals, similar to the New South Wales (NSW) Maternity Care Survey. Component 2 would cover the one-off fit out costs to establish 5 Birthing on Country hubs. These would be located in the greater Brisbane, Nowra, Alice Springs, Tennant Creek and East Arnhem land regions. Component 3 would provide ongoing funding for 3 midwives, 2 family support workers, a driver and an administration officer at each of the 5 Birthing on Country hubs. Component 4 would provide ongoing funding to provide free tampons and pads in all public high schools and primary schools, using a sustainable supplier. The per-student funding for the proposal would be consistent with reported experiences from a sustainable Australian supplier and indexed to the consumer price index.	

Costing overview

The proposal would be expected to decrease the fiscal and underlying cash balances by around \$94.8 million over the 2022-23 Budget forward estimates period.

The proposal would have an impact beyond the 2022-23 Budget forward estimates period. A breakdown of the financial implications (including separate PDI tables) over the period to 2032-33 is provided at Attachment A.

The financial implications of this proposal are sensitive to assumptions for Components 2 and 3, which are primarily informed by estimates for the Birthing on Country Brisbane and Nowra sites, and Component 4 which is based on the costs of providing sanitary products on a national scale and the demand for sanitary products in public schools.

Table 1: Financial implications (\$m)^{(a)(b)}

	2022-23	2023-24	2024-25	2025-26	Total to 2025-26
Fiscal balance	-32.6	-31.0	-15.3	-15.9	-94.8
Underlying cash balance	-32.6	-31.0	-15.3	-15.9	-94.8

(a) A positive number represents an increase in the relevant budget balance; a negative number represents a decrease.

(b) PDI impacts are not included in the totals.

Key assumptions

The Parliamentary Budget Office (PBO) has made the following assumptions in costing this proposal.

- For Component 1, the one-off national survey would have similar per-respondent costs as the NSW Maternity Care Survey and would incur modest set-up costs.
- For Component 2, the average costs per hub, including fit-out, would be \$10 million over 2 years which is based on the estimates for the Birthing on Country Brisbane and Nowra sites.
 - These capital costs would be incurred equally in the first 2 years of the proposal.
- For Component 3, the ongoing staffing costs would be based on the estimates for the Birthing on Country Brisbane and Nowra sites.
 - The costs would be incurred from 2024-25 after the 5 hubs become operational.
 - The estimated costs would grow in line with the average weekly ordinary time earnings.
- For Component 4, the ongoing costs would be based on estimated demand in public schools and lower cost of supplies associated with a large-scale national rollout.
 - The number of students eligible for this proposal would be consistent with projected female enrolments in public schools and age-based menstruation capability based on information from the United States' National Centre for Health Statistics.
 - Eligible school students would only access a fraction of their annual sanitary product requirements from school.
 - Initial required stock of product dispensers would be fully rolled out over the first 12 months, with ongoing costs for product refills and replacement of damaged dispensers.
 - The state and territory governments would be responsible for administering the program on an ongoing basis, with no additional departmental costs for the Australian Government.

Methodology

Each component was modelled separately. Financial implications were rounded consistent with the PBO's rounding rules as outlined on the PBO Costings and budget information webpage.¹

Component 1

The administered costs were obtained by keeping the per-respondent costs the same as the NSW survey and then upscaling the estimates by the ratio of national births relative to NSW births.

- These costs were obtained from the Bureau of Health Information's financial statements.
- The PBO also added some set-up costs.

Components 2 and 3

- The administered costs were obtained as per discussions in *Key assumptions* above.

¹ https://www.aph.gov.au/About_Parliament/Parliamentary_Departments/Parliamentary_Budget_Office/Costings_and_budget_information

Component 4

The administered costs were calculated by multiplying the estimated number of eligible students by the estimated per-student cost of period products and dispensers.

- The annual per-student cost of period products was based on real world supplier data, adjusted for the expected price reduction associated with supplying products on a national scale.
- The cost of dispensers was estimated based on a ratio of the number of students serviced per dispenser and the rate and cost of dispenser replacement due to damage, based on real world supplier data.
- Administrative costs associated with rollout and refilling of the products have been included through an additional margin on the per-student product cost. This margin is based on the cost of similar programs delivered within Australia and internationally.

Data sources

The economic parameters, including population by age and gender projections, were provided by the Department of Finance and the Treasury as at the *Budget 2022-23*.

The Department of Education, Skills and Employment provided data on the estimated number of enrolments for government schools in each state as at the *Budget 2022-23*.

Product and dispenser pricing information was sourced from Pixii, an Australian supplier of eco-friendly period products. Reported prices are as at June 2021.

Information on the probability of menstruation by age was taken from Martinez GM., *Trends and patterns in menarche in the United States, 1995 through 2013–2017*, [National Health Statistics Report no 146](#). Hyattsville, MD: National Centre for Health Statistics, 2020, accessed 15 March 2022.

Congress of Aboriginal and Torres Strait Islander Nurses and Midwives, 2018, [Submission to the Senate Select Committee on Stillbirth Research and Education](#), Parliament of Australia Submission no. 263, accessed 12 April 2022.

HealthStats NSW, 2021. [Babies in NSW](#), accessed 8 April 2022.

The Bureau of Health Information, 2020. [Independent Auditor's Report](#), accessed 8 April 2022.

Waminda, 2019. [Birthing on Country and Community Hub – Demonstration Site Feasibility Scoping Paper](#), accessed 8 April 2022.

Attachment A – Women's Health – financial implications

Table A1: Women's Health – Fiscal and underlying cash balances (\$m)^(a)

	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	2028-29	2029-30	2030-31	2031-32	2032-33	Total to 2025-26	Total to 2032-33
Expenses													
Administered													
<i>Component 1 – One-off national maternity health experiences survey in public hospitals</i>	-1.8	-	-	-	-	-	-	-	-	-	-	-1.8	-1.8
<i>Component 2 – One-off capital costs to establish 5 Birthing on Country hubs</i>	-25.0	-25.0	-	-	-	-	-	-	-	-	-	-50.0	-50.0
<i>Component 3 – Funding for staff at each of the 5 Birthing on Country hubs</i>	-	-	-9.0	-9.3	-9.6	-10.0	-10.3	-10.7	-11.2	-11.6	-12.1	-18.3	-93.8
<i>Component 4 – Funding for free period products in public schools</i>	-5.8	-6.0	-6.3	-6.6	-6.8	-7.1	-7.3	-7.6	-7.9	-8.1	-8.4	-24.7	-77.9
Total – administered	-32.6	-31.0	-15.3	-15.9	-16.4	-17.1	-17.6	-18.3	-19.1	-19.7	-20.5	-94.8	-223.5
Departmental													
<i>All components</i>	-	-	-	-	-	-	-	-	-	-	-	-	-
Total – departmental	-	-	-	-	-	-	-	-	-	-	-	-	-
Total (excluding PDI)	-32.6	-31.0	-15.3	-15.9	-16.4	-17.1	-17.6	-18.3	-19.1	-19.7	-20.5	-94.8	-223.5

(a) A positive number for the fiscal balance indicates an increase in revenue or a decrease in expenses or net capital investment in accrual terms. A negative number for the fiscal balance indicates a decrease in revenue or an increase in expenses or net capital investment in accrual terms. A positive number for the underlying cash balance indicates an increase in receipts or a decrease in payments or net capital investment in cash terms. A negative number for the underlying cash balance indicates a decrease in receipts or an increase in payments or net capital investment in cash terms.

- Indicates nil.

Table A2: Women's Health – Memorandum item: Public Debt Interest (PDI) impacts – Fiscal and underlying cash balances (\$m)^{(a)(b)}

	2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	2028-29	2029-30	2030-31	2031-32	2032-33	Total to 2025-26	Total to 2032-33
<i>Fiscal balance</i>	-0.4	-1.1	-1.6	-2.0	-2.5	-3.0	-3.5	-4.2	-4.9	-5.7	-6.9	-5.1	-35.8
<i>Underlying cash balance</i>	-0.3	-1.0	-1.6	-2.0	-2.4	-2.9	-3.5	-4.1	-4.8	-5.6	-6.7	-4.9	-34.9

- (a) As this table is presented as a memorandum item, these figures are not reflected in the totals in the table above. This is consistent with the approach taken in the budget where the budget impact of most measures is presented excluding the impact on PDI. If the reader would like a complete picture of the total aggregate, then these figures would need to be added to the figures above. For further information on government borrowing and financing please refer to the PBO's online budget glossary².
- (b) A positive number for the fiscal balance indicates an increase in revenue or a decrease in expenses or net capital investment in accrual terms. A negative number for the fiscal balance indicates a decrease in revenue or an increase in expenses or net capital investment in accrual terms. A positive number for the underlying cash balance indicates an increase in receipts or a decrease in payments or net capital investment in cash terms. A negative number for the underlying cash balance indicates a decrease in receipts or an increase in payments or net capital investment in cash terms.

² [Online budget glossary – Parliament of Australia \(aph.gov.au\)](https://aph.gov.au)