Statement of Principles concerning female sexual dysfunction (Balance of Probabilities) (No. 96 of 2016)

made under subsection 196B(3) of the

Veterans’ Entitlements Act 1986

Compilation No. 1

Compilation date: 24 September 2018

Includes amendments up to: Veterans’ Entitlements (Statements of Principles—Category 1B Stressor) Amendment Determination 2018 (No. 87 of 2018) (F2018L01188)

The day of commencement of this Amendment Determination is 24 September 2018.

Prepared by the Repatriation Medical Authority Secretariat, Brisbane
About this compilation

This compilation

This is a compilation of the Statement of Principles concerning female sexual dysfunction (Balance of Probabilities) (No. 96 of 2016) that shows the text of the law as amended and in force on 24 September 2018.

The notes at the end of this compilation (the endnotes) include information about amending laws and the amendment history of provisions of the compiled law.

Uncommenced amendments

The effect of uncommenced amendments is not shown in the text of the compiled law. Any uncommenced amendments affecting the law are accessible on the Legislation Register (www.legislation.gov.au). The details of amendments made up to, but not commenced at, the compilation date are underlined in the endnotes. For more information on any uncommenced amendments, see the series page on the Legislation Register for the compiled law.

Application, saving and transitional provisions for provisions and amendments

If the operation of a provision or amendment of the compiled law is affected by an application, saving or transitional provision that is not included in this compilation, details are included in the endnotes.

Modifications

If the compiled law is modified by another law, the compiled law operates as modified but the modification does not amend the text of the law. Accordingly, this compilation does not show the text of the compiled law as modified. For more information on any modifications, see the series page on the Legislation Register for the compiled law.

Self-repealing provisions

If a provision of the compiled law has been repealed in accordance with a provision of the law, details are included in the endnotes.
Statement of Principles
concerning
FEMALE SEXUAL DYSFUNCTION
(Balance of Probabilities)
(No. 96 of 2016)

The Repatriation Medical Authority determines the following Statement of Principles under subsection 196B(3) of the Veterans' Entitlements Act 1986.

Dated 28 October 2016
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Statement of Principles concerning
Female Sexual Dysfunction (Balance of Probabilities) (No. 96 of 2016)
Veterans’ Entitlements Act 1986

Compilation No. 1
Compilation date: 24/09/2018

Authorised Version F2018C00674 registered 24/09/2018
1 Name
This is the Statement of Principles concerning female sexual dysfunction (Balance of Probabilities) (No. 96 of 2016).

2 Commencement
This instrument commences on 28 November 2016.

3 Authority
This instrument is made under subsection 196B(3) of the Veterans’ Entitlements Act 1986.

4 Application
This instrument applies to a claim to which section 120B of the VEA or section 339 of the Military Rehabilitation and Compensation Act 2004 applies.

5 Definitions
The terms defined in the Schedule 1 - Dictionary have the meaning given when used in this instrument.

6 Kind of injury, disease or death to which this Statement of Principles relates

(1) This Statement of Principles is about female sexual dysfunction and death from female sexual dysfunction.

Meaning of female sexual dysfunction

(2) For the purposes of this Statement of Principles, female sexual dysfunction means:

(a) a clinically significant problem occurring during the female sexual response cycle that prevents the individual from experiencing satisfaction from sexual activity, where the problem has persisted for at least six months; and

(b) includes female sexual interest/arousal disorder, genito-pelvic pain/penetration disorder and female orgasmic disorder; and

(c) excludes hyperactive sexual desire disorder and persistent genital arousal disorder.

Note: female orgasmic disorder, female sexual interest/arousal disorder and genito-pelvic pain/penetration disorder are defined in the Schedule 1 – Dictionary.
Death from female sexual dysfunction

(3) For the purposes of this Statement of Principles, female sexual dysfunction, in relation to a person, includes death from a terminal event or condition that was contributed to by the person's female sexual dysfunction.

Note: terminal event is defined in the Schedule 1 – Dictionary.

7 Basis for determining the factors

On the sound medical-scientific evidence available, the Repatriation Medical Authority is of the view that it is more probable than not that female sexual dysfunction and death from female sexual dysfunction can be related to relevant service rendered by veterans or members of the Forces under the VEA, or members under the MRCA.

Note: relevant service is defined in the Schedule 1 – Dictionary.

8 Factors that must exist

At least one of the following factors must exist before it can be said that, on the balance of probabilities, female sexual dysfunction or death from female sexual dysfunction is connected with the circumstances of a person's relevant service:

(1) having a genitourinary condition from the specified list of genitourinary conditions at the time of the clinical onset of female sexual dysfunction;

Note: specified list of genitourinary conditions is defined in the Schedule 1 - Dictionary.

(2) having chronic renal failure at the time of the clinical onset of female sexual dysfunction;

Note: chronic renal failure is defined in the Schedule 1 - Dictionary.

(3) having a haematological or solid organ cancer before the clinical onset of female sexual dysfunction;

(4) undergoing a course of therapeutic radiation for cancer, where the lower abdomen, pelvis or perineal region was in the field of radiation, before the clinical onset of female sexual dysfunction;

(5) having an endocrine disorder from the specified list of endocrine disorders at the time of the clinical onset of female sexual dysfunction;

Note: specified list of endocrine disorders is defined in the Schedule 1 - Dictionary.

(6) having a neurological disorder from the specified list of neurological disorders at the time of the clinical onset of female sexual dysfunction;
(7) having a severe, chronic medical condition at the time of the clinical onset of female sexual dysfunction;
    Note: *severe, chronic medical condition* is defined in the Schedule 1 - Dictionary.

(8) having persistent pain of at least three months duration at the time of the clinical onset of female sexual dysfunction;
    Note: *persistent pain* is defined in the Schedule 1 - Dictionary.

(9) being obese at the time of the clinical onset of female sexual dysfunction;
    Note: *being obese* is defined in the Schedule 1 - Dictionary.

(10) experiencing blunt or penetrating trauma to the vulva, vagina, perineum or pelvis, including surgical trauma and traumatic childbirth, within the three months before the clinical onset of female sexual dysfunction;

(11) having undergone menopause before the clinical onset of female sexual dysfunction;
    Note: *menopause* is defined in the Schedule 1 - Dictionary.

(12) having a clinically significant disorder of mental health as specified at the time of the clinical onset of female sexual dysfunction;
    Note: *clinically significant disorder of mental health as specified* is defined in the Schedule 1 - Dictionary.

(13) experiencing a category 1A stressor within the five years before the clinical onset of female sexual dysfunction;
    Note: *category 1A stressor* is defined in the Schedule 1 - Dictionary.

(14) experiencing a category 1B stressor within the five years before the clinical onset of female sexual dysfunction;
    Note: *category 1B stressor* is defined in the Schedule 1 - Dictionary.

(15) being the victim of severe childhood abuse before the clinical onset of female sexual dysfunction;
    Note: *severe childhood abuse* is defined in the Schedule 1 - Dictionary.

(16) an inability to undertake any physical activity greater than three METs for at least the one year before the clinical onset of female sexual dysfunction;
    Note: *MET* is defined in the Schedule 1 - Dictionary.
(17) taking a drug or a drug from a class of drugs from the specified list of drugs, within the 30 days before the clinical onset of female sexual dysfunction;

Note: *specified list of drugs* is defined in the Schedule 1 - Dictionary.

(18) having a genitourinary condition from the specified list of genitourinary conditions at the time of the clinical worsening of female sexual dysfunction;

Note: *specified list of genitourinary conditions* is defined in the Schedule 1 - Dictionary.

(19) having chronic renal failure at the time of the clinical worsening of female sexual dysfunction;

Note: *chronic renal failure* is defined in the Schedule 1 - Dictionary.

(20) having a haematological or solid organ cancer before the clinical worsening of female sexual dysfunction;

(21) undergoing a course of therapeutic radiation for cancer, where the lower abdomen, pelvis or perineal region was in the field of radiation, before the clinical worsening of female sexual dysfunction;

(22) having an endocrine disorder from the specified list of endocrine disorders at the time of the clinical worsening of female sexual dysfunction;

Note: *specified list of endocrine disorders* is defined in the Schedule 1 - Dictionary.

(23) having a neurological disorder from the specified list of neurological disorders at the time of the clinical worsening of female sexual dysfunction;

Note: *specified list of neurological disorders* is defined in the Schedule 1 - Dictionary.

(24) having a severe, chronic medical condition at the time of the clinical worsening of female sexual dysfunction;

Note: *severe, chronic medical condition* is defined in the Schedule 1 - Dictionary.

(25) having persistent pain of at least three months duration at the time of the clinical worsening of female sexual dysfunction;

Note: *persistent pain* is defined in the Schedule 1 - Dictionary.

(26) being obese at the time of the clinical worsening of female sexual dysfunction;

Note: *being obese* is defined in the Schedule 1 - Dictionary.

(27) experiencing blunt or penetrating trauma to the vulva, vagina, perineum or pelvis, including surgical trauma and traumatic childbirth,
within the three months before the clinical worsening of female sexual dysfunction;

(28) having undergone menopause before the clinical worsening of female sexual dysfunction;

Note: menopause is defined in the Schedule 1 - Dictionary.

(29) having a clinically significant disorder of mental health as specified at the time of the clinical worsening of female sexual dysfunction;

Note: clinically significant disorder of mental health as specified is defined in the Schedule 1 - Dictionary.

(30) experiencing a category 1A stressor within the five years before the clinical worsening of female sexual dysfunction;

Note: category 1A stressor is defined in the Schedule 1 - Dictionary.

(31) experiencing a category 1B stressor within the five years before the clinical worsening of female sexual dysfunction;

Note: category 1B stressor is defined in the Schedule 1 - Dictionary.

(32) being the victim of severe childhood abuse before the clinical worsening of female sexual dysfunction;

Note: severe childhood abuse is defined in the Schedule 1 - Dictionary.

(33) an inability to undertake any physical activity greater than three METs for at least the one year before the clinical worsening of female sexual dysfunction;

Note: MET is defined in the Schedule 1 - Dictionary.

(34) taking a drug or a drug from a class of drugs from the specified list of drugs, within the 30 days before the clinical worsening of female sexual dysfunction;

Note: specified list of drugs is defined in the Schedule 1 - Dictionary.

(35) inability to obtain appropriate clinical management for female sexual dysfunction.

9 Relationship to service

(1) The existence in a person of any factor referred to in section 8, must be related to the relevant service rendered by the person.

(2) The factors set out in subsections 8(18) to 8(35) apply only to material contribution to, or aggravation of, female sexual dysfunction where the person's female sexual dysfunction was suffered or contracted before or during (but did not arise out of) the person's relevant service.
10  Factors referring to an injury or disease covered by another Statement of Principles

In this Statement of Principles:

(1) if a factor referred to in section 8 applies in relation to a person; and

(2) that factor refers to an injury or disease in respect of which a Statement of Principles has been determined under subsection 196B(3) of the VEA;

then the factors in that Statement of Principles apply in accordance with the terms of that Statement of Principles as in force from time to time.
Schedule 1 - Dictionary

Note: See Section 5

1 Definitions

In this instrument:

**being obese** means having a Body Mass Index (BMI) of 30 or greater.

**BMI** means W/H² where:

- W is the person's weight in kilograms; and
- H is the person's height in metres.

**category 1A stressor** means one of the following severe traumatic events:

(a) experiencing a life-threatening event;
(b) being subject to a serious physical attack or assault including rape and sexual molestation; or
(c) being threatened with a weapon, being held captive, being kidnapped, or being tortured.

**category 1B stressor** means one of the following severe traumatic events:

(a) killing or maiming a person;
(b) being an eyewitness to a person being killed or critically injured;
(c) being an eyewitness to atrocities inflicted on another person;
(d) participating in the clearance of a corpse or a critically injured casualty; or
(e) viewing a corpse or a critically injured casualty as an eyewitness.

Note: **corpse** and **eyewitness** are also defined in the Schedule 1 - Dictionary.

**chronic renal failure** means:

(a) having a glomerular filtration rate of less than 15 mL/min/1.73 m² for a period of at least three months; or
(b) a need for renal replacement therapy (dialysis or transplantation) for treatment of complications of decreased glomerular filtration rate which would otherwise increase the risk of morbidity and mortality; or
(c) undergoing chronic dialysis.

**clinically significant disorder of mental health as specified** means one of the following conditions, which is of sufficient severity to warrant ongoing management, which may involve regular visits (for example, at least monthly) to a psychiatrist, counsellor or general practitioner:

(a) eating disorder;
(b) depressive disorder;
(c) posttraumatic stress disorder; or
(d) schizophrenia.
corpse means the human remains or body parts of one or more persons who have met a violent or horrific death.

Note: Examples of a violent or horrific death may include death due to suicide, gunshot, improvised explosive devices, natural and technological disasters, terrorist attacks or motor vehicle accidents. Seeing a closed body bag or viewing a body in an open-casket coffin are excluded from this definition.

eyewitness means a person who experiences an incident first hand and can give direct evidence of it. This excludes persons exposed only to public broadcasting or mass media coverage of the incident.

female orgasmic disorder means the presence of either of the following symptoms which are experienced on almost all or all occasions of sexual activity:

(a) marked delay in, marked infrequency of, or absence of orgasm; or
(b) markedly reduced intensity of orgasmic sensations.

female sexual dysfunction—see subsection 6(2).

female sexual interest/arousal disorder means lack of, or significantly reduced, sexual interest/arousal, as manifested by at least three of the following:

(a) absent or reduced interest in sexual activity;
(b) absent or reduced sexual or erotic thoughts or fantasies;
(c) no or reduced initiation of sexual activity, and typically unreceptive to a partner's attempts to initiate;
(d) absent or reduced sexual excitement or pleasure during sexual activity in almost all or all sexual encounters;
(e) absent or reduced sexual interest or arousal in response to any internal or external sexual/erotic cues (for example, written, verbal, visual); or
(f) absent or reduced genital or non-genital sensations during sexual activity in almost all or all sexual encounters.

genito-pelvic pain/penetration disorder means persistent or recurrent difficulties with one or more of the following:

(a) vaginal penetration during intercourse;
(b) marked vulvovaginal or pelvic pain during vaginal intercourse or penetration attempts;
(c) marked fear or anxiety about vulvovaginal or pelvic pain in anticipation of, during, or as a result of vaginal penetration; or
(d) marked tensing or tightening of the pelvic floor muscles during attempted vaginal penetration.

menopause means the end of menstruation, defined as more than 12 months since the final menstrual period.

MET means a unit of measurement of the level of physical exertion. 1 MET = 3.5 ml of oxygen/kg of body weight per minute, 1.0 kcal/kg of body weight per hour or resting metabolic rate.
**Persistent Pain** means:

- (a) continuous; or
- (b) almost continuous; or
- (c) frequent, severe, intermittent pain;

which may or may not be ameliorated by analgesic medication and is of a level to cause interference with usual work or leisure activities or activities of daily living.

**Relevant Service** means:

- (a) eligible war service (other than operational service) under the VEA;
- (b) defence service (other than hazardous service and British nuclear test defence service) under the VEA; or
- (c) peacetime service under the MRCA.

Note: **MRCA** and **VEA** are also defined in the Schedule 1 - Dictionary.

**Severe Childhood Abuse** means:

- (a) serious physical, emotional, psychological or sexual harm whilst a child aged under 16 years; or
- (b) neglect involving a serious failure to provide the necessities for health, physical and emotional development, or wellbeing whilst a child aged under 16 years;

where such serious harm or neglect has been perpetrated by a parent, a care provider, an adult who works with or around that child, or any other adult in contact with that child.

**Severe, Chronic Medical Condition** means an illness which substantially impacts on social, occupational or other important areas of functioning; and requires on-going daily or almost daily management of symptoms. This management may include, but is not limited to, assistance with activities of daily living; bed rest; dietary modification; drug therapy; nursing care; oxygen therapy or physiotherapy. This management must be supervised by a registered health practitioner.

Severe, chronic medical conditions do not usually resolve spontaneously, are rarely cured completely and may progress to life threatening illnesses. Examples of these conditions include poorly controlled asthma, chronic obstructive pulmonary disease, poorly controlled diabetes mellitus, inflammatory bowel disease, pemphigus, psoriasis and rheumatoid arthritis.

**Specified List of Drugs** means:

- (a) antipsychotics;
- (b) aromatase inhibitors;
- (c) beta blockers;
- (d) irreversible monoamine oxidase inhibitors;
- (e) selective serotonin reuptake inhibitors;
(f) serotonin and noradrenaline (norepinephrine) reuptake inhibitors; or
(g) tricyclic antidepressants.

**specified list of endocrine disorders** means:
(a) adrenal insufficiency;
(b) Cushing's syndrome;
(c) diabetes mellitus;
(d) Hashimoto's disease with hypothyroidism;
(e) hyperprolactinaemia;
(f) hypogonadism;
(g) hypopituitarism; or
(h) hypothyroidism.

**specified list of genitourinary conditions** means:
(a) endometriosis;
(b) interstitial cystitis/bladder pain syndrome;
(c) Sjogren's syndrome involving the vagina;
(d) urinary incontinence;
(e) uterine fibroids;
(f) uterine prolapse; or
(g) other genitourinary condition of sufficient severity to warrant ongoing management by a medical practitioner.

**specified list of neurological disorders** means:
(a) cauda equina syndrome;
(b) cerebrovascular accident;
(c) moderate to severe traumatic brain injury;
(d) multiple sclerosis;
(e) Parkinson's disease or secondary parkinsonism; or
(f) spinal cord injury.

**terminal event** means the proximate or ultimate cause of death and includes the following:
(a) pneumonia;
(b) respiratory failure;
(c) cardiac arrest;
(d) circulatory failure; or
(e) cessation of brain function.

**VEA** means the *Veterans’ Entitlements Act 1986*. 
Endnotes

Endnote 1—About the endnotes

The endnotes provide information about this compilation and the compiled law. The following endnotes are included in every compilation:

Endnote 1—About the endnotes
Endnote 2—Abbreviation key
Endnote 3—Legislation history
Endnote 4—Amendment history

Abbreviation key—Endnote 2

The abbreviation key sets out abbreviations that may be used in the endnotes.

Legislation history and amendment history—Endnotes 3 and 4

Amending laws are annotated in the legislation history and amendment history. The legislation history in endnote 3 provides information about each law that has amended (or will amend) the compiled law. The information includes commencement details for amending laws and details of any application, saving or transitional provisions that are not included in this compilation.

The amendment history in endnote 4 provides information about amendments at the provision (generally section or equivalent) level. It also includes information about any provision of the compiled law that has been repealed in accordance with a provision of the law.

Misdescribed amendments

A misdescribed amendment is an amendment that does not accurately describe the amendment to be made. If, despite the misdescription, the amendment can be given effect as intended, the amendment is incorporated into the compiled law and the abbreviation “(md)” added to the details of the amendment included in the amendment history.

If a misdescribed amendment cannot be given effect as intended, the abbreviation “(md not incorp)” is added to the details of the amendment included in the amendment history.
## Endnote 2—Abbreviation key

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