

First Women's Health Strategy for England to tackle gender health gap

- Major new research on women's health issues to increase understanding of female specific health conditions and tackle the data gap to ensure diagnosis and treatment work for women.
- Ensuring all doctors are trained to provide the best care to women by introducing mandatory specific teaching and assessment on women's health for all graduating medical students and incoming doctors.
- £10 million for breast screening programme to provide 25 new mobile breast screening units for areas with the greatest challenges of screening uptake.

Women and girls across England will benefit from improved healthcare following the publication of the first ever government-led Women's Health Strategy for England today (Wednesday 20 July).

Following a call for evidence which generated almost 100,000 responses from individuals across England, and building on Our Vision for Women's Health, the strategy sets bold ambitions to tackle deep-rooted, systemic issues within the health and care system to improve the health and wellbeing of women and reset how the health and care system listens to women.

The strategy includes key commitments around new research and data gathering, the expansion of women's health-focused education and training for incoming doctors, improvements to fertility services, ensuring women have access to high quality health information, and updating guidance for female specific health conditions like endometriosis to ensure the latest evidence and advice is being used in treatment.

Women live on average for longer than men but spend more of their life in poor health, often limiting their ability to work and participate in day to day activities. Closing the gender health gap and supporting women to live well will not only benefit the health and wellbeing of women, but the health of the economy.

Responses to the call for evidence highlighted a need for greater focus on women's specific health conditions including fertility and pregnancy loss, and gynaecological conditions such as endometriosis, which affects 1 in 10 women. To support progress already underway in these areas the strategy aims to:

- Provide a new investment of £10 million for a breast screening programme, which will provide 25 new mobile breast screening units to be targeted at areas with the greatest challenges of uptake and coverage. This will provide extra capacity for services to recover from the impact of the pandemic, boost uptake of screening in areas where attendance is low, tackle health disparities and contribute towards higher early diagnosis rates in line with the NHS Long Term Plan.

- Remove additional barriers to IVF for female same-sex couples. There will no longer be a requirement for them to pay for artificial insemination to prove their fertility status, and NHS treatment for female same-sex couples will start with 6 cycles of artificial insemination, prior to accessing IVF services if necessary.
- Improve transparency on provision and availability of IVF so prospective parents can see how their local area performs to tackle the “postcode lottery” in access to IVF treatment.
- Recognise parents who have lost a child before 24 weeks through the introduction of a pregnancy loss certificate in England.
- Ensure specialist endometriosis services have the most up to date evidence and advice by updating the service specification for severe endometriosis, which defines the standards of care patients can expect, to ensure. This sits alongside the National Institute for Health and Care Excellence (NICE) review of its guideline on endometriosis.

This will support our ambition that national healthcare services consider women’s needs specifically and by default, and that women can access services that meet their reproductive health needs throughout their lives.

Health and Social Care Secretary Steve Barclay said:

Our health and care system only works if it works for everyone.

It is not right that 51% of our population are disadvantaged in accessing the care they need, simply because of their sex.

The publication of this strategy is a landmark moment in addressing entrenched inequalities and improving the health and wellbeing of women across the country.

Minister for Women’s Health Maria Caulfield said:

When we launched our call for evidence to inform the publication of this strategy, women across the country set us a clear mandate for change.

Tackling the gender health gap will not be easy – there are deep seated, systemic issues we must address to ensure women receive the same standards of care as men, universally and by default.

This strategy is the start of that journey, but eradicating the gender health gap can’t be done through health services alone. I am calling on everyone who has the power to positively impact women’s health, from employers to doctors and teachers to industry, to join us in our journey.

Women and clinicians also called for the expansion of information and educational resources for women and healthcare professionals, and more

cohesion in the way services are provided, making it as simple as possible for women to access the healthcare they need.

Our vision set out that all women should have access to high-quality information and education from childhood through to adulthood, and that all women should have equal access to and experience of services, reducing disparities in outcomes. Building on this, the strategy commits to:

- Transforming the NHS website into a world-class, first port of call for women's health information by updating existing content and adding new pages – including on adenomyosis, a gynaecological condition where endometrial tissue grows into the muscle of the uterus – and bringing together third-party new and existing content.
- Encouraging the expansion of Women's Health Hubs around the country and other models of 'one-stop clinics', bringing essential women's services together to support women to maintain good health and drive efficiency in the NHS, helping clinicians as they work to tackle the Covid backlogs.
- Publishing a definition of trauma-informed practice for use in the health sector and encouraging its adoption in health settings, to help address barriers to accessing services that people affected by trauma such as domestic violence or psychological abuse can experience, ensuring they can access the care they need.

Women's Health Ambassador Dame Lesley Regan said:

Having spent my career looking after women, I am deeply aware of the need for a women's health strategy which empowers both women and clinicians to tackle the gender health gap.

We need to make it as easy as possible for women to access the services they need, to keep girls in school and women in the workplace, ensuring every woman has the opportunity to live her life to her fullest potential.

This strategy is a major step in the right direction, listening to the concerns of women, professionals and other organisations to tackle some of the deep rooted issues that we know exist.

Feedback from thousands of women across the country revealed that they feel their voices were not always listened to, and there was a lack of understanding or awareness amongst some medical professionals about health conditions which affect women. To address this, the strategy commits to:

- Commissioning urgent research by the National Institute for Health and Care Research (NIHR) into healthcare professionals' experiences of listening to women in primary care, with a focus on menstrual and gynaecological symptoms to inform policy to ensure women's voices are heard.
- Introducing specific teaching and assessments on women's health in undergraduate curricula for all graduating medical students from 2024 to

2025 and for all incoming doctors.

- Major investment via the NIHR into research on women's health issues including a new policy research unit on reproductive health, and plans to address data gaps, identify barriers to women participating in research, and improve the quality of data collected by the NHS. This will include running a new reproductive health experience survey every two years to continue to listen to women and gather insight on their experiences of services, including for contraception and menopause.

By tackling the gender data gap through increased research, building understanding through training and tackling the root causes of why women's voices are not always listened to, both women and clinicians should feel empowered to have more informed discussions over their care.

Chief Scientific Advisor at the Department of Health and Social Care and Chief Executive Officer of the NIHR Lucy Chappell said:

The gender health gap stems from a range of factors. Over the years we have seen less research into health conditions that affect women and this gender data gap has had a significant contribution on the impact of such research.

The NIHR has made good progress in this area, from increased research on conditions such as endometriosis, boosting participation of women in trials and supporting female researchers.

The publication of this strategy builds on that progress and will help ensure women's voices and priorities are at the heart of research.

The publication of the Strategy is the latest action taken by the government to address the issues and disparities many women face. This includes appointing the first ever Women's Health Ambassador for England earlier this year, the creation of a network of family hubs in 75 upper-tier local authorities across England, and providing protections to the millions of people who experience domestic abuse through the Domestic Abuse Act 2021.

We have also taken action to increase access to Hormone Replacement Therapy (HRT) and reduce costs of this medication. The creation of a prepayment certificate will mean women can access HRT on a month-by-month basis if need be, easing pressure on supply, paying a one-off charge equivalent to two single prescription charges, currently £18.70, for all their HRT prescriptions for a year. This system will be implemented by April 2023.

To ensure women can reliably access HRT, decisive action has been taken including the appointment of Madelaine McTernan as chair of the HRT supply taskforce and issuing of serious shortage protocols to even out distribution and provide greater flexibility to allow community pharmacists to supply specified alternatives, where appropriate.

The government has already been taking action to begin to address the issues

and disparities women face, including:

- establishing a Maternity Disparities Taskforce to tackle disparities in outcomes and experiences of care for women and babies by improving access to pre-conception and maternity care for women from ethnic minorities and those living in the most deprived areas
- investing £127 million to increase and support the maternity NHS workforce and to increase neonatal care capacity over the next year. This is on top of £95 million investment into recruitment of an additional 1,200 midwives and 100 consultant obstetricians
- establishing the UK Menopause Taskforce to drive forward the work on improving healthcare support for women, raise levels of awareness in the population and among healthcare professionals, encourage workplace support and consider where further research is needed to address gaps in the evidence base
- reducing the cost of, and improving access to, hormone replacement therapy (HRT) by identifying ways to support the HRT supply chain and addressing shortages some women face on a limited number of products, and by reducing the cost of HRT through a new bespoke HRT pre-payment certificate which we will introduce by April 2023
- banning virginity testing and hymenoplasty in the UK through the Health and Care Act 2022. Virginity testing and hymenoplasty are forms of violence against women and girls and such practices will not be tolerated in the UK
- enhancing women's reproductive wellbeing in the workplace through the Health and Wellbeing Fund 2022 to 2025. The fund supports voluntary, community and social enterprise organisations to expand and develop projects to support women experiencing reproductive health issues such as the pregnancy loss or menopause to remain in or return to the workplace.
- banning the availability of 'Botox' and cosmetic fillers to under 18s for cosmetic purposes and banning adverts for cosmetic surgery that target under-18s
- investing £302 million in family hubs and the start for life programme, including the creation of a network of family hubs in 75 upper-tier local authorities across England, bespoke parent-infant relationship and perinatal mental health support, and the establishment of breastfeeding support services
- providing protections to the millions of people who experience domestic abuse through the Domestic Abuse Act 2021.
- abolishing the tampon tax, removing VAT from women's sanitary products, and rolling out of free sanitary products in schools, colleges and hospitals
- introducing the Online Safety Bill, to make the UK the safest place in the world to be online. The bill will restrict exposure to legal but harmful content, such as exposure to self-harm, harassment and eating disorders content.