Royal College of Obstetricians & Gynaecologists

The RCOG's vision for women's healthcare for the next Government

Women make up 51% of the population, yet women's health has historically been left behind.

Investment in services has been inadequate and fragmented, alongside a persistently low level of investment in research on women's health and responses to treatment.

This means that health services can miss the opportunity to ask the right questions, and provide the right information, care and support at the right time, to make **the biggest different in women's health throughout their lives**.

The next UK government must set out an ambitious vision for women's health throughout the life course, including a specific focus on **how women can be better supported to access healthcare**, **how to improve safety**, and **how the impact of policies across government departments on women's healthand wellbeing** will be considered.



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01



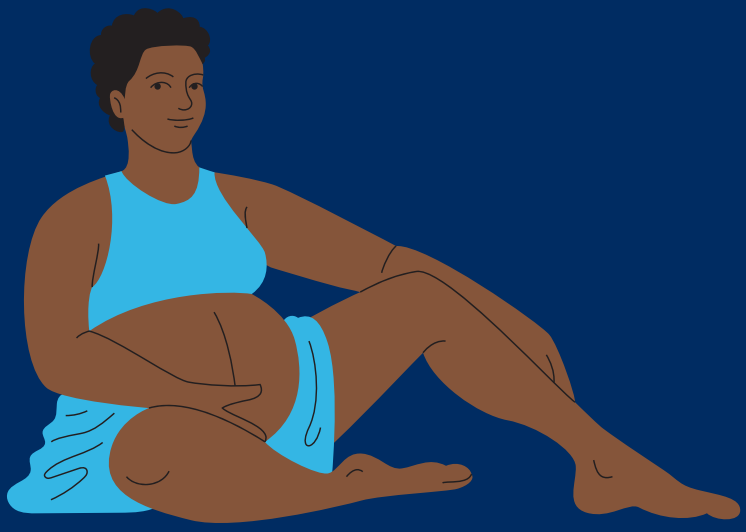
Prioritisation of women's health

The government must maintain a focus on implementing the Women's Health Strategy, building on the current priorities to improve women's health throughout the life-course. This should include continued commitment and recurrent funding for the implementation of the Strategy and support for the long-term sustainability of Women's Health Hubs.

Maternity care

The government must significantly improve maternity care by implementing fully funded policies and programmes to ensure all women receive high-quality, personalised and safe maternity care, which supports their physical and mental health during and after pregnancy. The government must also commit to a time-limited target to end the higher risk of maternal mortality among Black, Asian and ethnic minority women, and for women living in more deprived areas, which is accompanied by ring-fenced funding.

02



03



Gynaecological waiting lists

As the only women-only specialty, gynaecology waiting lists have consistently outstripped growth compared to other specialties since at least 2018. The Department for Health and Social Care and NHS England should set up a joint taskforce to address the unique growth in waiting lists in gynaecology.

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04

Abortion law reform

The government should commit to parliamentary time for abortion law reform. Abortion law must be modernised to stop the prosecutions of women, prevent medical professionals from being prosecuted for providing essential care, and reflect modern day medical practice by being subject to regulatory and professional standards, rather than being a criminal issue.



05



Global SRHR

The Foreign, Commonwealth and Development Office must continue to prioritise sexual and reproductive healthcare and rights (SRHR) within its work on gender equality and global health and return spending on SRHR to pre-cut levels of 5% of the ODA budget.

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