



Improving the health of the 51%

Our joint vision for the next Government

Presidents' foreword

Women represent 51% of the UK population and 47% of the workforce. Women play pivotal roles in society and influence the health and wellbeing of the rest of the population. It is time for a new and bold approach to women's health.

By listening to women we can start to break down the stigma and taboo that persist in too many areas of women's health. By providing accurate and accessible information at the right time we can support women to make positive choices and prevent avoidable illness.

By designing care around the needs of women, we can streamline services and make them more accessible. By shifting focus away from episodic care towards prevention, we can empower women to maintain healthy lives and improve their well-being.

We are championing a life course approach to women's health which will move the UK towards a truly preventative health service. At every stage of life, we have opportunities to improve women's health and future wellbeing.

Women's healthcare services must be designed in order to respond to the natural progression from puberty to pregnancy and childbirth, menopause and healthy ageing.

We believe we can transform the way women understand their health needs and how they access and receive healthcare. Get things right for women and everyone benefits.



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Our 5 calls to action for the next government

1. A national women's health strategy

The Government must improve women's health by creating a national women's health strategy which demonstrates how government departments, arm's length bodies, and other organisations work together to put women at the centre of their care.

2. High quality Relationships & Sex Education

The Department for Education must provide high quality training for teachers, with enough time stipulated in the curriculum to teach the subject, and adequate assessment of the quality of its teaching.

3. Removing barriers to access healthcare

NHS England, clinical commissioning groups and local authorities must co-commission women's sexual and reproductive health services with adequate oversight from the NHS.

4. The six-week postnatal maternal check – a missed opportunity

The NHS must provide a six-week check to cover the health of both baby and mother. This should be fully funded so that GPs and other healthcare professionals have the time to give every new mother the care she deserves.

5. Decriminalisation of abortion

The Government must decriminalise abortion up to 24 weeks. Abortion would remain subject to regulatory and professional standards and treated as a medical rather than a criminal issue.

Calls to action



1. A national women's health strategy

Too often women struggle to get the right information about their health, have difficulty booking routine appointments and encounter a health system which isn't designed for them. Health services miss crucial moments to ask the right questions, prevent illness and promote healthy lives. As a result, women are experiencing health inequalities and outcomes that could be avoided.

To prevent the accumulation of health risk factors and to provide girls and women with the healthcare they require, services need to be organised around a life-course approach. This takes an integrated view of health, recognising both that women have specific needs at certain stages in their lives, and that there are links across the life-course stages.

The Government must improve women's health by creating a national women's health strategy which demonstrates how government departments, arm's length bodies, and other organisations work together to put women at the centre of their care.



2. High quality Relationships & Sex Education

The UK continues to have the highest teenage pregnancy rates in Western Europe, while around 10% of abortions among under-19s are performed for young women who have had 1 or more previous abortions. It is vital that young people are taught medically accurate and unbiased information about sex and relationships that allows them to make informed decisions about their health and wellbeing.

In 2020, Relationships and Sex Education will become a statutory subject to be taught in all schools. But there is little assurance that this will be taught to the highest standards.

The Department for Education must provide high quality training for teachers, with enough time stipulated in the curriculum to teach the subject, and adequate assessment of the quality of its teaching.



3. Removing barriers to access healthcare

Women's sexual and reproductive health in England is commissioned via three separate bodies (local authorities, NHS England and clinical commissioning groups). The lack of a single accountable organisation has resulted in women requiring multiple appointments and referrals to receive basic health services. It is expensive, confusing and wastes time.

A joined-up approach to commissioning and service provision is vital to deliver contraception, cancer screening, and even advice about the menopause. This will save money for the NHS in the short, medium and long-term. It will also support our workforce to provide women and girls with high-quality and efficient healthcare.

NHS England, clinical commissioning groups and local authorities must co-commission women's sexual and reproductive health services with adequate oversight from the NHS.



4. The six-week postnatal maternal check – a missed opportunity

Women can experience many mental and physical health problems during and after pregnancy, but there are some that are specifically linked to pregnancy and childbirth, including depression, anxiety, obsessive compulsive disorder, postpartum psychosis and postpartum PTSD. Although the 'baby blues' are experienced by many new mothers, around 10-15% develop a much deeper and longer-term depression known as postnatal depression. This usually develops within six weeks of giving birth and can come on gradually or very suddenly.

While many women are provided a six-week check, too often this doesn't consider the health and the wellbeing of the mother. The maternal element of the six-week check is not currently funded by NHS England.

The NHS must provide a six-week check to cover the health of both baby and mother. This should be fully funded so that GPs and other healthcare professionals have the time to give every new mother the care she deserves.



5. Decriminalisation of abortion

Abortion care is an essential aspect of women's health yet remains a criminal offence in Great Britain. It is time to remove criminal sanctions associated with abortion in England and Wales, so that abortion care is provided according to clinical priorities, without the threat of prosecution.

The Government must decriminalise abortion up to 24 weeks. Abortion would remain subject to regulatory and professional standards and treated as a medical rather than a criminal issue.

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