

# Closing the Women's Health Gap in Canada

*A Bold Collaboration is Pushing for a National Women's Health Strategy*



**H**ave you heard about the women's health gap? Canadian women spend 24% more time in poor health than men, according to a report by the McKinsey Health Institute.

Consider these sobering additional facts: despite living longer, Canadian women report higher rates of chronic disease, mental health challenges, longer wait times for sex-specific care, and are more likely to be misdiagnosed for acute conditions like heart attacks than men, according to a report by Deloitte Canada and the IWK Foundation.

Closing the women's health gap would improve the health of millions of women and give every woman in Canada an extra

week of good health every year. It would also **boost the Canadian economy by at least \$37 billion annually** by 2040.

The previous Canadian women's health strategy from 1999 is outdated and no longer used by policymakers. A comprehensive, up-to-date strategy that reflects the rapid pace of innovation is long overdue and essential to address health inequities for women.

Leaders from top Canadian health organizations supporting women's health have come together as the Canadian Women's Health Leadership Alliance (CWHLA) to mobilize a push for a new national Canadian women's health strategy, and they need your help. [➔](#)

## THE AMBIEN STORY

The U.S. Food and Drug Administration (FDA) approved the sleeping medication Ambien™ (zolpidem) in 1992, recommending the same dose for women and men, even though the drug had not been studied well in women. So many women were still groggy the next day and having car accidents that a lawsuit was filed against the manufacturer in the early 2000s. The FDA finally revised the approval in 2013, cutting the recommended dose for women in half.

“A new women’s health strategy is imperative for improving the health of Canadian women today and for future generations,” said Lynn Posluns, President and CEO of Women’s Brain Health Initiative and a member of the CWHLA.

**“ WE STAND AT A PIVOTAL MOMENT IN HISTORY FOR CLOSING THE WOMEN’S HEALTH GAP. THE TIME IS NOW FOR ALL CANADIANS TO SUPPORT THIS COLLECTIVE GOAL.**

Learn more about the women’s health gap, actions CWHLA members are taking to advocate for a new national women’s health strategy, and how you can support this critical initiative.

## MIND THE GAP

Despite women comprising half of the Canadian population, they face distinct disadvantages in health experiences, health care, health research, and investments in health innovation. The mounting evidence is alarming. Here are some key examples:

## THE GAP IN HEALTH EXPERIENCE

- **out of every 100 Canadians, women experience about 14 years living with disability** compared with 11 years for men, about 24% higher;
- **Canadian women are disproportionately or differently affected by more than half of the top ten health conditions;** and
- **globally, sexual and reproductive health and maternal health account for less than 5% of the women’s health burden.**

According to Dr. Marie-Renée B-Lajoie, an emergency room doctor and partner at McKinsey & Company in Montreal and co-author of the McKinsey Health Institute report,

**“ THE BIGGEST CONTRIBUTORS TO THE GAP IN CANADA ARE CONDITIONS THAT ARE TYPICALLY MANAGED BY FAMILY PHYSICIANS, SUCH AS CARDIOVASCULAR DISEASES.**

While sexual, reproductive, and maternal health only represents a small portion of the overall health burden for women, it still has a significant negative impact on women’s health outcomes and the Canadian economy. The Menopause Foundation of Canada estimates that the unmanaged symptoms of menopause alone cost the Canadian economy \$3.5 billion annually, including \$237 million in lost productivity and 540,000 lost workdays per year.

The IWK Foundation, a not-for-profit organization that raises funds supporting the largest pediatric and trauma centre in Atlantic Canada, expected to receive 2,000 responses to a survey of women’s health experiences in Atlantic Canada in June 2025. Instead, they received more than 27,000.

Jennifer Gillivan, President and CEO of the IWK Foundation and CWHLA member underscored that the stories are heartbreaking, and they are also a blueprint for change.

**“ Women are demanding a new approach to their health, one that values their experiences, prioritizes preventive care, embraces gender-informed research and education, and invests in specialized services across our lifespans.**

Half of the women’s health gap in Canada is driven by disparities in cardiovascular care, including access to new interventions, surgeries, and appropriate medications. These inequities result in delayed diagnoses, longer wait times, and fragmented treatment journeys.

Case in point: “Women who come to the emergency room experiencing a heart attack are often assessed to receive stents like their male counterparts. However, most of these women have microvascular disease, for which stents may not be appropriate,” said Dr. B-Lajoie.

Early heart attack signs in women are missed in 78% of women, according to the Heart and Stroke Foundation of Canada.

**It's no wonder women face healthcare disadvantages compared to men, given these statistics:**

- ▶ **less than 9% of program and course descriptions at 16 Canadian medical schools include women's health;** and
- ▶ **Canadian women undergoing surgery face double discrimination.** Female surgeons are paid at lower rates than their male counterparts, and surgeons are reimbursed 28% less for procedures performed on women than for similar procedures performed on men, according to a study published in the *Canadian Journal of Surgery* in July 2023.

## THE GAP IN HEALTH RESEARCH

Inequities in women's health research are systemic, deeply entrenched, and cause critical gaps in health knowledge, care, and outcomes. For decades, women have been excluded from or underrepresented in studies, resulting in a lack of recognition that they experience health and disease differently, disproportionately, and uniquely throughout their lifespans.

These disparities leave the actual benefits, side effects, and risks of adverse events for women as unknowns until after new drugs are on the market. It's shocking to learn that up to 75% of adverse drug reactions are experienced by women, yet many medications prescribed to women have only been tested in men.

Despite mandates to encourage the integration of sex and gender into research, the percentage of the Canadian Institutes of Health Research (CIHR) funding for research into women's health remains unchanged over the past 15 years at 7%, according to a study led by Dr. Liisa Galea, the womenmind Treliving Family Chair in Women's Mental Health at the Centre for Addiction and Mental Health in Toronto and Lead of the Women's Health Research Cluster.

The same study, published in *Biology of Sex Differences* in October 2025, also found that less than 5% of funded grants examined the 11 causes of disease burden or death that disproportionately affect women.

"Women pay taxes and yet we're not getting a return on our investment if only 7% of CIHR funds are going to women's research," said Ms. Gillivan.

Zahra Jivan, partner and Health Transformation Leader at Deloitte Canada, added, "Research funding in women's health has been heavily concentrated on 'bikini medicine', reinforcing the misconception that reproductive and maternal health are the key areas affecting women, leaving other critical areas

such as autoimmune disorders, brain health, oncology, and cardiology significantly understudied and resulting in poor health outcomes.

## THE GAP IN INVESTMENTS IN HEALTH INNOVATION

Canada has a robust network of innovators focused on women's health, including biopharmaceuticals, medical devices, digital health, and technology companies.

- ▶ **there are more than 200 women's health startups in Canada,** with the sector projected to contribute \$37 billion to GDP by 2040; and
- ▶ **90% of femtech companies in Canada are founded by women,** according to Femtech Canada.

"Female-led companies are more likely to succeed than male-led companies, yet they only receive about 2% of total venture-capital funds," said CWHLA member Rachel Bartholomew, CEO and Founder of Hyivy Health, a startup that creates therapeutic, remote monitoring devices for gynecological conditions, and co-founder of Femtech Canada.

**“It's infuriating that women innovators constantly have to work against ingrained biases to attract funding.”**

## THE PUSH FOR A NEW WOMEN'S HEALTH STRATEGY

CWHLA members are collaborating in different ways to push for a new Canadian women's health strategy.

Last year, while Ms. Bartholomew was working on a proposal for federal government funding, she noticed 

Read Bill S-243, an Act to Establish a National Framework for Women's Health in Canada and follow its progress in the Senate at [parl.ca/LegisInfo/en/bill/45-1/S-243](http://parl.ca/LegisInfo/en/bill/45-1/S-243).

Stay up to date on advocacy efforts for Bill S-243 at [WHFramework.ca](http://WHFramework.ca). Follow @whframework on all social media. The primary hashtag for sharing updates is #ForWomenForCanada.

that submissions from other leading women's health organizations discussed similar inequities to those faced by Femtech Canada. She invited the leaders to connect, and more than 40 joined the July kickoff call.

The introduction ignited a flurry of collaboration, including gathering evidence to characterize the extent of the gap and in-person meetings with members of Parliament, senators, and policymakers to build awareness and map out a way forward for advocacy efforts.

"We're getting a lot of political interest at both levels of the federal government, underscoring that the time to make this happen is now," said Ms. Gillivan. "There are strong indications the government will soon appoint a chair to lead the creation of a new women's health strategy. The chair would inform federal and provincial stakeholders, the private sector, and philanthropic organizations about a concerted effort to invest and focus on women's health, women's health research, and women's health technology and innovation over the next ten years," she said.

CWHLA member Carmen Wyton is Chair of the Women's Health Coalition of Canada, an organization committed to addressing barriers, gaps, and biases in menstrual, reproductive, and sexual health. When she joined the call last July, she had been advocating to the government for a framework for women's health for almost two years. Carmen met Senator Danièle Henkel in June, and by August, they were working on developing a proposed bill for women's health.

Ms. Wyton explained the difference between a framework and a strategy. "A framework is embedded in law and includes accountability measures. By contrast, a strategy is a priority that may be funded but with no requirement for the government to follow through."

**“If we can get a framework for women's health embedded in legislation, then women will never be left behind again. It would be politically very challenging for any political party to repeal it once enacted.”**

## HOW CANADA COMPARES TO PEER COUNTRIES

Canada is the only G7 country without a comprehensive, up-to-date women's health strategy.

Australia, the United Kingdom, and New Zealand recently refreshed their national women's health strategies with strong visions and accountability measures. The European Union is working on finalizing a new strategy for 2027.

"We have strategic plans from the United Kingdom, Australia, and New Zealand. We also have the European Union's draft strategic plan as we're contributing input," said Ms. Gillivan. "The health systems are similar, and these countries have developed excellent strategies for improving women's health. There's no need to reinvent the wheel."

## THE CANADIAN WOMEN'S HEALTH LEADERSHIP ALLIANCE

Follow Canadian Women's Health Leadership Alliance members and the organizations they lead for more information:

**Lynn Posluns**  
President and CEO:  
Women's Brain Health Initiative  
[womensbrainhealth.org](http://womensbrainhealth.org)

**Jennifer Gillivan**  
President and CEO: IWK Foundation  
[iwkfoundation.org](http://iwkfoundation.org)

**Rachel Bartholomew**  
CEO and Founder: Hyivy Health  
[hyivy.com](http://hyivy.com)

**Carmen Wyton**  
Chair: Women's Health Coalition of Canada  
[thewhc.ca](http://thewhc.ca)

**Amy Flood**  
Executive Director:  
Women's Health Collective Canada  
[whcc.ca](http://whcc.ca)

CWHLA member Amy Flood is Executive Director of Women's Health Collective Canada, a strategic alliance of member foundations, hospitals, and research institutes focused on advancing equity in women's health, and the largest non-government funder of women's health research in Canada.

Ms. Flood and Ms. Bartholomew submitted federal budget recommendations for investment in research and innovation last November. Their proposals were not funded, but discussions about the inequities in women's health went a long way to raising awareness with Health Minister Marjorie Michel, Industry Minister Mélanie Joly, and Minister of Women and Gender Equality Rechie Valdez. These three ministers will need to work together across portfolios to implement a comprehensive strategy.

Senator Henkel introduced Bill S-243 to establish *A Framework for Women's Health in Canada* on December 9, 2025.

"The bill calls on the government to develop a national framework to strengthen research, training, prevention, innovation, the transfer of knowledge to universities, and access to care, for women living in rural regions, Indigenous, LGBTQ+, those who are racialized or those who are without regular medicine," Senator Henkel said in a video posted on LinkedIn the day she introduced the bill.

Bill S-243 includes a requirement for the minister of health to develop the framework in consultation with key stakeholders, and the requirement to report on key priorities and implement a strategy within one year of the act coming into force. The third reading will likely take place around the time this Mind Over Matter® article is published.

The Women's Health Coalition of Canada will continue to lead work with Senator Henkel and grassroots advocacy for the bill in collaboration with Women's Health Collective Canada and Femtech Canada, advised Ms. Wyton. CWHLA partner organizations have aligned their priorities around the *Framework for Women's Health* and are key stakeholders in advocating for the bill's approval and for presenting priorities that would fall under the legislation.

## HOW YOU CAN GET INVOLVED

There are many ways you can support the push for a Canadian women's health strategy.

"Become informed about the evidence and talk about the gaps. Women's health is often invisible, so the more we talk about it, the harder it is to ignore," said Ms. Flood. "Share credible information from CWHLA members' organizations on social media to amplify our voices."

"Engage your employer about key women's health issues. Make conscious decisions to donate to organizations supporting women's health," Dr. B-Lajoie advised.

"When I talk with my friends about the statistics, they are amazed to learn the women's health gap is so wide. Share our evidence-based reports widely so more women can become informed and join our advocacy efforts," said Ms. Jivan.

"Contact your member of Parliament and tell them to vote YES to the bill for *A Framework for Women's Health*. Make your ask personal by telling the story of your experiences with the Canadian healthcare system, as a patient, caregiver, clinician, researcher, or innovator. We want MPs to take these stories to the vote," said Ms. Wyton.

**“This is a feminist movement. We’re not burning our bras, but we need something close to that intensity so that every woman and those who care about women say, ‘Finally, THIS is what we need.’”**

"As we go with pitchforks and sticks to Parliament to ask for change, we have more influence as a group with the same voice, even as we contribute different layers to the same narrative," Ms. Bartholomew said. 🌍

### KEY REFERENCES FOR FURTHER READING

*Closing the women's health gap: Canada's \$37 billion opportunity.* McKinsey Health Institute. October 22, 2025. <https://www.mckinsey.com/mhi/our-insights/closing-the-womens-health-gap-canadas-37-billion-dollars-opportunity>

*The case for advancing women's health in Canada.* Deloitte and IWK Foundation. November 13, 2025. <https://www.deloitte.com/ca/en/Industries/life-sciences-health-care/about/the-case-for-advancing-womens-health-in-canada.html>