

LEADING BEYOND THE GAP:

Closing the Women's Health Gap in Canada

Blueprint for Action

February 2026



Closing the women's health gap in hormonal health and menopause in Canada

Hormonal health affects all Canadian women yet remains overlooked

~95%

of Canadian women experience menopause symptoms, with 25% seeking treatment due to severity¹

~80%

of Canadian women are affected by premenstrual syndrome²

72%

of the Canadian women's health gap stems from gaps in hormonal therapies

\$3B

in lost income for women due to a reduction of hours and/or pay or leaving the workforce due to menopause⁴

5%

of the Canadian women's health gap is driven by menopause and hormonal health. Closing it could add ~\$4.5B to Canada's GDP⁵



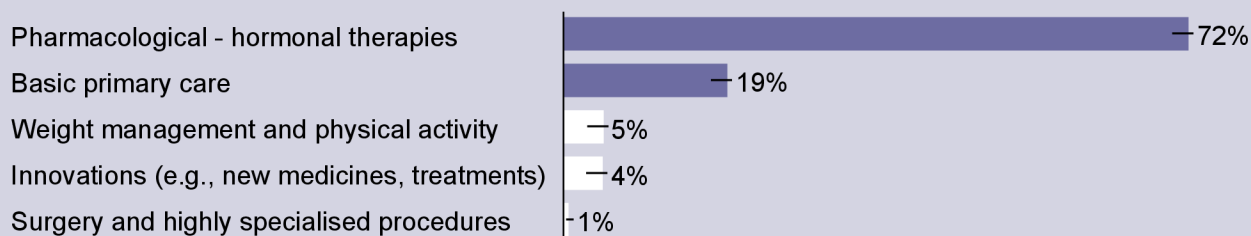
1. Canadian Menopause Society (2025)
2. "Hormonal contraceptive use and prevalence of premenstrual symptoms in a multiethnic Canadian population," BMC Women's Health(2017)
3. McKinsey Health Institute data (2025)
4. "Menopause and Work in Canada", Menopause Foundation of Canada (2023)
5. "Closing the women's health gap: Canada's \$37 billion opportunity," McKinsey & Company (2025)
6. "The Silence and the Stigma: Menopause in Canada", Menopause Foundation of Canada (2022)
7. "Research finds that few women receive diagnosis of perimenopause or menopause", Evernorth Health Services (2025)
8. "The gender health gap: Its impact on working women in Canada", Sun Life (2024)

Gaps in the current healthcare ecosystem...

require action to close

- 1 Stigma limits awareness** among Canadian women about broad range of symptoms (hot flashes had 84% awareness compared to urinary tract infections with 18% awareness among women⁶)
Partner with foundations to launch community campaigns on menopause symptoms and care, leveraging existing infrastructure (e.g., mammogram letters)
- 2 Primary care shortages and diagnostic delays** cause women to go undiagnosed (US study reports only 8% of women with confirmed diagnoses⁷) and therefore either untreated or unadvised on menopause symptoms
Ensure access to primary care for women, including family physicians, nurse practitioners, women-specific support resources (e.g., hotlines)
- 3 Limited menopause training for care practitioners** causing physicians to not proactively provide advice, and when they do, it is found to be unhelpful
Require primary care providers to discuss menopause with female patients over 40
- 4 Symptoms go undertreated** (38% of Canadian women felt their symptoms were undertreated⁶) due to misconceptions and barriers to hormone therapy interventions (contributing to 72% of the gap³)
Identify barriers to access HRT and partner with stakeholder groups (e.g., care providers) to close gaps
Partner with the CPA to devise a plan to address the HRT shortage in Canada

Portion of DALY gap for women by intervention type for gynecological diseases in Canada 2019³



- 5 Negligible funding to support research or awareness** likely due to the stigma and perception that “every woman goes through it”
Mobilize government, philanthropy, and corporate funding for menopause research and awareness
- 6 Insufficient workplace support** (77% of women want more support for menopause⁶), contributing to lost productivity (~10% leaving or planning to leave due to symptoms⁸)
Define adapted benefits and workplace policies and partner with insurers and employers to close gaps

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The Women's Health Collective
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positive change for Canada

