Chest Heart & Stroke Scotland

NO LIFE HALF LIVED

CHSS WOMEN'S HEALTH PLAN 2026–2029

A Brighter, Healthier Future for Women in Scotland

Tackling inequalities in women's heart and stroke health, across the life course

Dr Amy Small
Clinical Advisor

SSNF / SSAHPF Joint Conference

Women's health is being failed

Chest Heart & Stroke Scotland

Despite making up over half the population - **2.85m+ women in Scotland** - women are fighting against systemic barriers to quality healthcare.

Symptoms are too often dismissed, under-recognised, misdiagnosed, or under-treated, and the result is women spending a greater share of their lives in ill health than men.

This isn't inevitable. It's socially constructed and preventable.

UK FEMALE LIFE EXPECTANCY

20th → 26th

place out of 38 OECD countries

A pattern seen across chest, heart, stroke, and Long Covid conditions.

Why CHSS built this plan

CHSS's strategy, ***No Life Half Lived 2023–28***, aims for a Scotland where everyone affected by chest, heart, stroke or Long Covid conditions can live full lives with the right support, at the right time, in the right place.

CHSS recognises that targeted action for women is vital to delivering that vision.

It also carries a note on language: 'women' is used throughout, but the plan applies to a wider audience, delivered on individual need.

The CHSS women’s health plan is in alignment with :

- Scottish Government Women's Health Plan: Phase 2
- Scotland's Population Health Framework
- Public Health Scotland 10-Year Strategy
- Long Term Conditions & Service Renewal Frameworks

Co-produced, not top-down

An evidence-based, person-centred approach shaped every part of this plan.

- Consultation with internal & external health and social care colleagues
- Engagement with the CHSS Voices of Experience Panel
- Desk-based research: prevalence data, literature review, audit of existing CHSS work

We continue to co-produce our work alongside women with lived experience as this plan is delivered.

140+

survey responses from women across Scotland; people with lived experience, volunteers, health & social care professionals, supporters, and the public.

Seven aims, 2026–2029

To improve the health and wellbeing of women affected by chest, heart, stroke, and Long Covid conditions in Scotland.

1. Clear, accessible women-specific health information
2. Improve awareness & visibility of women's health
3. Women-specific prevention & early detection
4. Strengthen education & training about women’s health
5. Enhance post-diagnosis support for women
6. Campaign & advocate for women's health
7. Evaluate progress & drive improvement

Stacked disadvantage, across a lifetime

Chest Heart & Stroke Scotland

4 in 5	women say they are not listened to by healthcare professionals.
25% vs 75%	of women vs men get tested for heart failure when presenting with symptoms; women then wait 20 weeks for diagnosis vs 3.6 weeks for men.
<30%	of early-phase clinical trial participants are women; just 1% of global R&D funding targets non-cancer women's health.
25.7 yrs	earlier that women in the most deprived areas of Scotland develop poor health, compared to the least deprived.

Higher mortality, despite lower prevalence

In Scotland, chest, heart, and stroke conditions are leading causes of death and disability for women.

4,600+

stroke incidences in women, every year

1,200+

deaths due to stroke in women, every year

4,100+

heart attack incidences in women, every year

1,500+

deaths due to heart attack in women, every year

Women are less likely to receive evidence-based treatment for cardiovascular conditions including heart attack, OCHA and stroke.

Conditions medicine still overlooks

Spontaneous coronary artery dissection (SCAD) and **takotsubo cardiomyopathy,** both important causes of heart attacks, remain poorly understood clinically.

Sex-specific cardiac conditions are compounded by the same drivers already covered: under-treatment, under-representation in research, and delayed diagnosis.

90%

of SCAD and takotsubo cases occur in women

Menopause & menstrual health: a thread through the whole plan

Menopause, maternal, reproductive, and gynaecological health is one of the plan's core cross-cutting themes — woven through the aims, not treated as a separate silo.



It intersects directly with cardiac and stroke risk across a woman's life course.

Awareness is the first step.

Recognising how CVD and stroke show up differently in women, and where the system fails to notice, is what changes outcomes.

Together, we can build a brighter, healthier future for women in Scotland.



Chest Heart & Stroke Scotland

What next?

Now it’s over to you.

Have a read of the plan.

What changes can you make?



Chest Heart & Stroke Scotland

Thank you!

With special thanks to **Jessica Wilson**
Women's Health Strategic Advisor

Dr Amy Small
Amy.Small@chss.org.uk
@dramysmall