

Cafodd yr ymateb hwn ei gyflwyno i ymgynghoriad y [Pwyllgor Iechyd a Gofal Cymdeithasol](#) ar [Flaenoriaethau'r Chweched Senedd](#)

This response was submitted to the [Health and Social Care Committee](#) consultation on [Sixth Senedd Priorities](#)

HSC PSS 110

Ymateb gan: | Response from: Women & Girls' Health Wales Coalition

Blaenoriaethau cychwynnol a nodwyd gan y Pwyllgor Initial priorities identified by the Committee

Mae'r Pwyllgor wedi nodi nifer o flaenoriaethau posibl ar gyfer ei waith yn ystod y Chweched Senedd, gan gynnwys: iechyd y cyhoedd a gwaith ataliol; y gweithlu iechyd a gofal cymdeithasol, gan gynnwys diwylliant sefydliadol a lles staff; mynediad at wasanaethau iechyd meddwl; arloesi ar sail tystiolaeth ym maes iechyd a gofal cymdeithasol; cymorth a gwasanaethau i ofalwyr di-dâl; mynediad at wasanaethau adsefydlu i'r rhai sydd wedi cael COVID ac i eraill; a mynediad at wasanaethau ar gyfer cyflyrau cronig tymor hir, gan gynnwys cyflyrau cyhyrsgerbydol.

The Committee has identified several potential priorities for work during the Sixth Senedd, including: public health and prevention; the health and social care workforce, including organisational culture and staff wellbeing; access to mental health services; evidence-based innovation in health and social care; support and services for unpaid carers; access to COVID and non-COVID rehabilitation services; and access to services for long-term chronic conditions, including musculoskeletal conditions.

Blaenoriaethau allweddol ar gyfer y Chweched Senedd Key priorities for the Sixth Senedd

C2. Yn eich barn chi, pa flaenoriaethau allweddol eraill y dylai'r Pwyllgor eu hystyried yn ystod y Chweched Senedd mewn perthynas â:

- a) **gwasanaethau iechyd;**
- b) **gofal cymdeithasol a gofalwyr;**
- c) **adfer yn dilyn COVID?**

Q2. In your view, what other key priorities should the Committee consider during the Sixth Senedd in relation to:

- a) **health services;**



- b) social care and carers;**
 - c) COVID recovery?**
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Gwasanaethau iechyd

Health services

The British Heart Foundation Cymru and Fair Treatment for the Women of Wales (FTWW) are facilitating a third sector coalition in developing a Women and Girls' Health Quality Statement for Wales. The coalition comprises health-focused, condition-specific, and equality rights organisations and patient advocates from Wales and the UK, all of whom have come together with the aim of ensuring all aspects of women and girls' health are considered and prioritised accordingly.

The Coalition includes representatives and / or has support from:

Autistic UK

British Pregnancy Advisory Service (BPAS)

British Heart Foundation Cymru

Brook

Compassionate Cymru

Disability Wales

Ehlers Danlos Support UK

Endometriosis UK

Ethnic Minority Women in Welsh Healthcare

Faculty of Sexual and Reproductive Health

Fair Treatment for the Women of Wales

Fertility Network UK

Gwent Women's Institute

Hypermobility Syndromes Association

International Association of Premenstrual Disorders

Jo's Cervical Cancer Trust

Learning Disability Wales

Long Covid Wales

Lupus UK

Marie Curie

Mind Cymru

National Federation of Women's Institutes

Plan International

RareQOL

Royal College of General Practitioners

Royal College of Nursing Wales

Royal College of Obstetricians and Gynaecologists

Royal College of Physicians

Tommy's

Women's Equality Network Wales

We also anticipate content being endorsed by a number of other organisations who have expressed interest in the resulting document.

The definition of 'women's health' in this context is its plain English definition – the health of women, girls, and people assigned female at birth. The Coalition aims to address women's health holistically and throughout the life-course and in line with the wealth of research highlighting the myriad clinical, societal, and economic factors causing women to have poorer outcomes than men across health and social care sectors.

In accordance with Welsh Government's Clinical Plan for Covid-19 Recovery, 'Looking Forward' (1) the Coalition has come together to develop a Quality Statement which will comprise a range of evidence-based condition / disease / issue-specific appendices and actions, a commitment to the implementation of which we would expect to see from the Welsh Government and Wales's seven Health Boards, in collaboration with Coalition members and patients.

As it stands, there is currently no Women and Girls' Health Plan in Wales. Meanwhile, the Scottish Government has recently published its own women's health plan (2) and the UK Government is consulting on a Women's Health Strategy for England (3). In Wales, a Women's Health Plan is not yet on the agenda, despite the fact that women make up 52% of the population, and the publication of reports and data highlighting historical and ongoing failings in women's healthcare like Baroness Cumberlege's 'First Do No Harm' (4).

There exists in Wales a Welsh Government-resourced Women's Health Implementation Group / Programme, funded for 5 years from 2018. However, its remit is limited to vaginal mesh, faecal incontinence and endometriosis and the funding allocated (£1million p/a over 5 years) is wholly insufficient to address significant gaps and variation in service delivery: endometriosis alone affects some 150,000 women in Wales, similar numbers as are affected by diabetes or asthma.

One of the Coalition's key recommendations would be to see Women and Girls' Health permanently and properly embedded within NHS strategy and service planning, much like other major disease / condition areas. This would help to address enduring health inequalities experienced by women, girls, and those assigned female at birth, including a lack of recognition, research, training, and investment in service provision for conditions predominantly affecting and / or having a disproportionately negative impact on them.

We would urge the Committee to recognise and endorse the need for women and girls' health to be prioritised in Wales, as demonstrated by the level of support for this work from the number and range of organisations and patients involved. We would also ask the Committee to commit to supporting the implementation of recommendations made by the Women and Girls' Health Coalition in its Quality Statement. Coalition members would be delighted to assist the Committee in its deliberations and any subsequent actions in this regard.

References:

- 1) <https://gov.wales/health-and-care-services-pandemic-recovery-plan-published>
- 2) <https://www.gov.scot/publications/womens-health-plan/>
- 3) <https://www.gov.uk/government/consultations/womens-health-strategy-call-for-evidence/womens-health-strategy-call-for-evidence>
- 4) https://www.immdsreview.org.uk/downloads/IMMDSReview_Web.pdf