Women’s Health Matters: When, Where, and Why

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October 20, 2021
Women’s health matters today

Women make up the **majority of the U.S. population**—and nearly **50% of the workforce**

Women are responsible for **85% of consumer spending**—and make over **85% of health care decisions**

Women control **60% of personal wealth**

Women are more likely to be **caregivers**
Women’s health matters because . . .

Cardiovascular disease is the #1 killer of WOMEN in the US, yet only 1/3 of the participants in clinical trials are female.

TRIAL SUBJECTS

78% of Americans with autoimmune disease are women—it is estimated that 50 million people are afflicted.

Not until 2016 were female mice mandated to be included in research by NIH.

Women are 3/4 of the 5.4 MILLION people suffering from Alzheimer’s disease.

Yet 66% of the animals used in neuroscience research are male or of unreported gender.

Lung cancer is the #1 cause of cancer death in women.

More women die of lung cancer each year than from breast, ovarian and uterine cancers combined.

Non-smoking women are three times more likely than non-smoking men to get it.

Twice as many women as men suffer from depression in the U.S. It is the leading cause of disability in women.

https://whamnow.org
The NIH has set an ambitious goal of advancing rigorous research that is relevant to women’s health:

- a world where the biomedical research enterprise thoroughly integrates sex and gender influences
- a world where every woman receives evidence-based disease prevention and treatment tailored to her own needs, circumstances, and goals
- a world where women in science careers reach their full potential
But the year in which we realize this goal is a long way off
Females remain underrepresented in research, and few studies analyze the data by sex

Percent of articles that provided the sample size (n) by sex, rationale for single-sex studies, or rationale for the lack of sex-based analyses

Current policies are making a difference, but they lack teeth
WHAM commissioned RAND to assess the societal impact of increasing investment in research on the health of women.
Doubling NIH funding for women’s ADRD research pays for itself 3X over.
Doubling funding for other diseases leads to even higher ROIs

- **Coronary artery disease**
  - + $20M
  - 9500% ROI
  - + $1.5B into the economy
  - Annualized ROI 16.4%

- **Rheumatoid arthritis**
  - + $6M
  - 174,000% ROI
  - + $10.5B into the economy
  - Annualized ROI 28.3%
Women are the majority—but they are not yet the norm
And if we valued women’s innovation, we would see many more patented health devices that help women.

6,500 more female-focused health inventions

40,000 more female-focused health discoveries

Today, we have a knowledge base that is built disproportionately on studies of men’s health.

- **Men: evidence-base**
- **Women: good-enough medicine**

Recent & current work
Getting to evidence-based care for all women will require additional funding to address the knowledge gaps.
The gaps in the evidence base come at a high cost to society

In 2020, Alzheimer's disease cost our economy over $305 BILLION.

In 2020 cardiovascular disease cost our economy over $555 BILLION.

Rheumatoid arthritis costs our economy over $40 BILLION a year.

Nearly 2 million women are pulled out of the workforce to care for loved ones with Alzheimer's disease.

Heart disease kills approximately one woman every minute.

80% of rheumatoid arthritis patients are between ages 35-50.

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The goal is a year in which all women have access to evidence-based care—that is based on them.
• Getting clear about what has been assumed and what has and has not been studied

• A research agenda informed by an understanding of the extent and consequences of existing knowledge gaps

• Policies that require research to look for and report indications of sex and gender differences

• Scoring rubrics that acknowledge that addressing gender gaps in the evidence-base is both innovative and significant

• Funding to level the playing field—and not just get us to ‘a little better’

So how do we get to that year?
Women’s health matters today, not because it would be nice or good or equitable, but because we are getting it wrong and it is costing lives and health and the economy
Thank you

For questions, email chloe@rand.org