

# IMPROVING WOMEN'S HEALTH EQUITY

An Official Position Statement of the Society for Women's Health Research



## POSITION

Sex and gender, race and ethnicity, identity, faith, disability status, pregnancy, socioeconomic status, incarceration, and immigration status should not impede an individual's ability to access or receive quality health care.

### SWHR supports policies that:

- Recognize certain communities are disproportionately or unjustly affected by issues of systematic bias, which in turn impact health and quality of life.
- Address sexism, racism, and other forms of prejudice or institutional bias as public health issues.
- Aim to improve the representation and inclusion of historically underrepresented populations within biomedical research.
- Work to eliminate existing systemic biases within our public health infrastructure and health care system.

## BACKGROUND

Thirty years ago, women and people of color were routinely excluded from clinical trials. SWHR was founded in 1990 to advocate for the inclusion of women and people of color in medical research to ensure that they benefit from advances in health care and medicine. SWHR is committed to raising awareness of health disparities facing women and especially women of color, who face the compounded harms and challenges associated with both their gender and race.<sup>1</sup>

Although progress has been made, including greater inclusion of women in clinical trials, work remains to increase diversity in research, including clinical trials, and specifically the participation of people of color. In 2019, the percentage of white and Hispanic participants in clinical trials for FDA-approved new drugs increased as compared to the previous year, while the percentage of African American participants decreased.<sup>2</sup> African Americans make up about 13% of the U.S. population, but they represented only 9% of trials participants in 2019. SWHR supports policies and practices that ensure trial participation reflects the overarching patient/treatment population.

Additionally, disparities in access to care and health outcomes across the U.S. persist — and in many cases are worsening. Health disparities refer to differences in health or health care that are tied to social, economic, or environmental status.

While SWHR's primary mission is to eliminate disparities related to sex and gender, we recognize that health disparities can relate to multiple aspects of an individual's background or identity, and we support policies that aim to reduce or eliminate such disparities. The presence of disparities does not just affect one community or group of individuals, but broadly impacts population health.<sup>3</sup>

Healthy People 2020<sup>4</sup> defines health equity as the "attainment of the highest level of health for all people." It further states that [a]chieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities." Working to attain health equity across the U.S. aligns with SWHR's overall mission, vision and values.

Recognizing that health disparities exist is the first step toward mitigating them. SWHR's vision of making women's health mainstream is inclusive of those from all backgrounds. We are committed to supporting historically underrepresented or underserved communities in our work, and acknowledge the role that we play in supporting these communities to achieve women's health equity.

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<sup>1</sup>Society for Women's Health Research (2020). SWHR stands with the Black community against racial injustice. Accessible from: <https://swhr.org/swhr-stands-with-the-black-community-against-racial-injustice/>

<sup>2</sup>Ortman, EO (2020). Women make up 72% of study participants for FDA-approved new drugs in 2019. SWHR. Available from: <https://swhr.org/women-make-up-72-of-study-participants-for-fda-approved-new-drugs-in-2019/>

<sup>3</sup>Kaiser Family Foundation (2020). Disparities in health and health care: Five key questions and answers. Available from: <https://www.kff.org/racial-equity-and-health-policy/issue-brief/disparities-in-health-and-health-care-five-key-questions-and-answers/>

<sup>4</sup>Healthy People 2020. U.S. Department of Health and Human Services. Accessible from: <https://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities> .

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*"Sex" refers to the biological classification of living things according to reproductive organs and chromosomes. "Gender" refers to an individual's self-identification as masculine, feminine, both, or neither, and is intrinsically associated with sociodemographic factors that ultimately affect health. Both sex and gender influence health across the lifespan, and SWHR strives to comprehensively address both sex and gender as they relate to women's health. When citing research, SWHR uses terminology consistent with what is used in the study. As inclusive language practices continue to evolve in the scientific and medical communities, we will reassess our language as necessary.*