



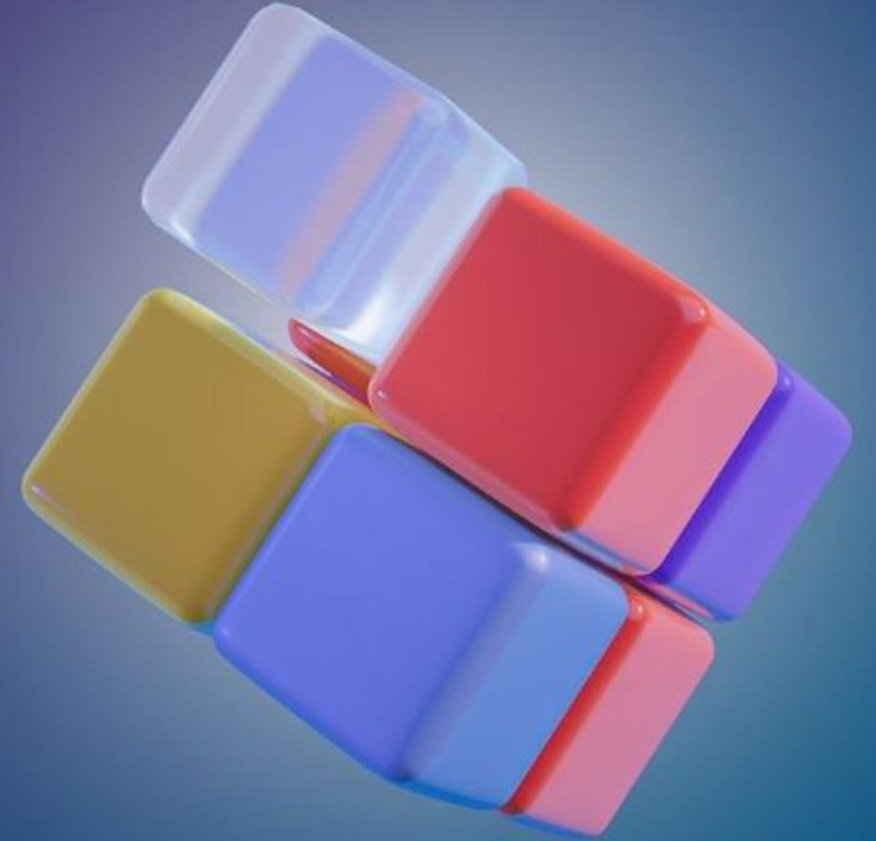
UHR Conference 2025

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Closing the Gap: Creating a Women's Health Strategy to Bridge the Gender Gap in Sickness Absence

Introduction to Edge Hill

- 1885 First non-denominational teacher training college for women.
- Demographics 35.9% men and 64.1% women.
- Early adopters of Menopause Support.
- Athena Swan Bronze Award and working towards Silver.
- Passionate about gender equity and supporting women at work.



POLL: Does your university have a dedicated women's health and wellbeing strategy currently?

Women's Health Research : Why is women's health a priority?

POLL: What percentage of people affected by chronic and autoimmune conditions are women?

Research

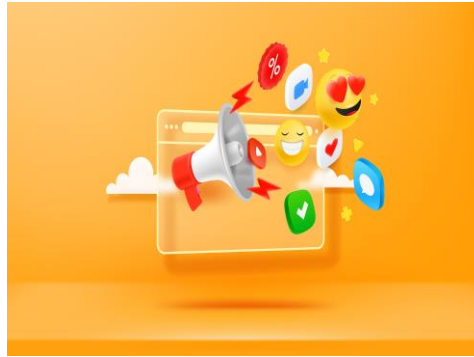
- 71% of women in the UK are in full or part time employment, with an upwards trend continuing (ONS, 2025)
- Groups with the highest rates of sickness absence are 'women, older workers, those with long-term health conditions, those working part-time' (CIPD, 2023).
- Women are disproportionately impacted by autoimmune conditions and certain female only health conditions, and more likely to be part-time (34% vs 14%), with phases of their life, including maternity, menstruation and menopause increasing their risk of exiting the workforce (Safwan et al., 2024; ONS, 2025).
- Women identify how there is limited understanding of women's health conditions, with stigma prevalent around 'messy and leaky' bodies (Atkinson et al., 2021; Wilkinson et al., 2023).
- Under and misdiagnosis, lack of understanding, and limited effective workplace accommodations contribute to women absenteeism and exiting of the workforce (Fooladi et al., 2023; Faubian et al., 2024).
- Stress also increases the likelihood of sickness absence, with 76% of those who take short or long-term absence noting stress as a significant factor. Women disproportionately take on more labour at home and in the workplace (CIPD, 2023).

How did we create our Women's Health and Wellbeing Strategy at Edge Hill?

How did we develop our Women's H&W strategy?



Improved monitoring



Staff Voice



Research



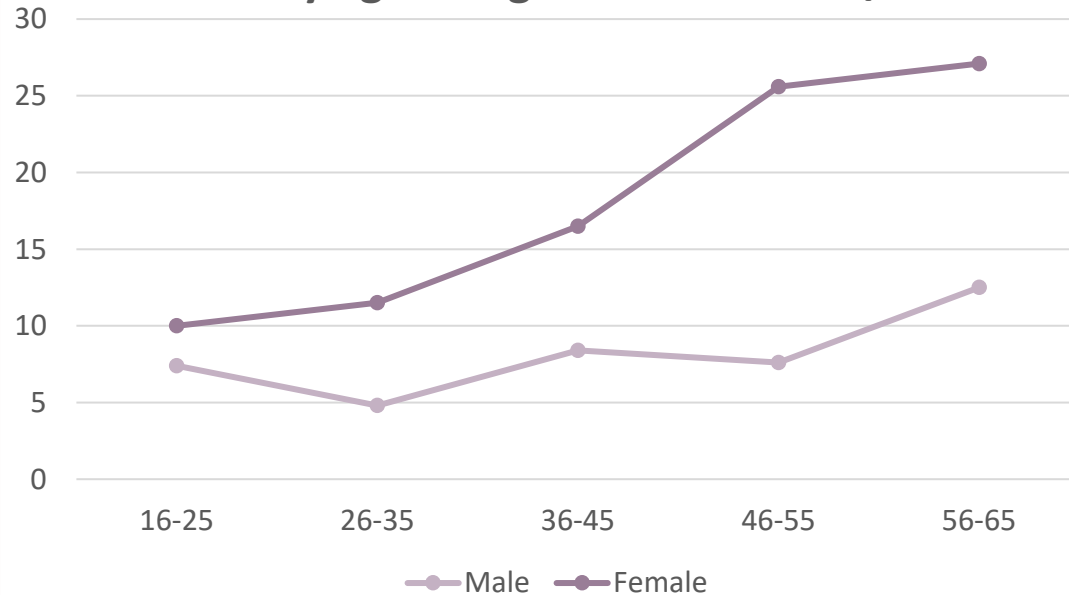
Health & Wellbeing
data

POLL: Has your organisation introduced specific women's health categories to improve absence monitoring and health surveillance?

Data analysis

23/24

WDL by age and gender at EHU 22/23



- 299 WDL to pregnancy-related ill-health
- 25% of new mothers at EHU experienced perinatal mental health.
- 47 WDL to baby loss
- 74% of WDL to anxiety & depression were women.
- 71% of WDL to work-related stress were women.
- 15% of women returning to work after maternity leave are at risk of leaving.

What did staff tell us?

- Workplace Culture and attitudes towards women's health concerns impacts wellbeing.
- Breastfeeding support, awareness, and understanding is needed.
- Enhanced access to information and increased visibility would be supportive.
- Flexible working positively enhances wellbeing.
- Compassionate and supportive line managers can buffer against poor mental health.
- Women who could afford a longer period of maternity leave reported positive mental health, because they returned to work when ready.
- There was reluctance to openly discuss their health and wellbeing needs for fear of stigma, being perceived as less competent or committed.

What did staff tell us?

- Organisational improvements to policies and processes are vital to advance gender equity and support women, particularly mothers.
- Awareness of baby loss, perinatal mental health and fertility issues is needed.
- Awareness of menstrual and gynaecological health conditions such as endometriosis, PCOS and Fibroids, with a symptom-led approach is necessary.
- A proactive approach is essential to support new mothers as they return to work.

Our Framework

Individual: Encourages staff to take action to maintain their own health and voice their support needs.

Group: Emphasises the importance of the role of colleague support.

Leader: Focuses on the role of line managers in providing support and managing risks.

Organisation: Involves developing supportive policies and practices to improve overall wellbeing.

Outside context: Highlights the role of external support, national legislation, policy and social context.



Our Strategy Strands

Menopause, Menstruation & Gynaecological Health	Physical Health	Mental Health	Pregnancy & Maternity	Fertility
<p>I: Dedicated Women's Health pages. Awareness Campaigns, Webinars. Dedicated CBT for Menopause. OH.</p> <p>G: Menopause Café, Staff Training.</p> <p>L: Line manager Training, Buy-in from Senior Leaders.</p> <p>O: Introduced a Women's Health Policy, Review of processes, OD Culture projects. EDISG, Athena Swan.</p>	<p>I: Awareness of women's physical health risks. Dedicated info page. Access to health promotion activities. Health Checks, Flu Jabs. OH.</p> <p>G: Training and awareness on health topics.</p> <p>L: Line manager awareness, toolkits, training.</p> <p>O: Supportive policies and processes.</p>	<p>I: Dedicated info page. Access to mindset coaching. Webinars. EAP, TRiM. WAPs. Breath workshops.</p> <p>G: Training for staff. Staff networks. Awareness campaigns</p> <p>L: Line manager training, toolkits.</p> <p>O: Discounted and free exercise programmes. Policies, processes, stress risk assessments. MHC, IH&S</p>	<p>I: Dedicated info page, EAP, awareness campaigns, webinars.</p> <p>G: Staff networks, Staff training, awareness campaigns.</p> <p>L: Line manager training and toolkits.</p> <p>O: Review of flexible working/family friendly policies. New RTW support for new mothers. Breastfeeding awareness, support & risk assessment.</p>	<p>I: Dedicated info page and resources, EAP,</p> <p>G: Fertility network, Webinars and awareness campaigns, staff training.</p> <p>L: Line manager Training and toolkits.</p> <p>O: Review of policies and processes. Paid leave for reasonable time off for apts.</p>

Additional themes



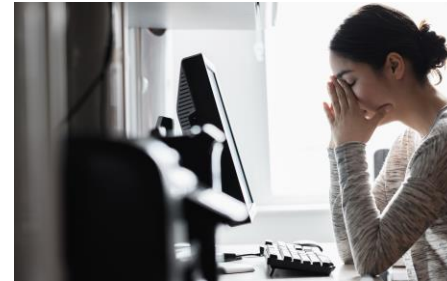
Baby Loss



Parents



Carers



Sexual misconduct



Domestic Abuse

What impact have we made so far?

- Long-term absence overall down by 7.9%
- The number of short-term absence occurrences for women is down by 11%
- Carried out 7 domestic abuse risk assessments with staff since introducing the policy.
- 70% of staff accessing mental health support through EAP were women and more than 80% saw a reduction in anxiety or depression from severe to mild.
- The number of Wellness Action Plans completed has increased by 200% and 80% of all completed were women.
- We have recruited 13 new parental transition mentors and trained our internal coaching network to support new mothers returning from maternity leave.
- We have trained 9 members of staff from HR to be Domestic Abuse Ambassadors.
- Enhanced OMP with further review ongoing.

It hasn't all been plain sailing...

What have been our challenges?

- Engagement with resources and training
- Campus based not Hybrid
- Change in leadership
- Workforce changes : Financial Position
- Engaging male allies



What are our strengths and opportunities?

- Change in leadership
- Support from Institutional Committees e.g. H&S, Athena Swan, EDISG
- Evidence of positive impact already.
- Plans to enhance OD offer.
- Outside context – Legislation, and Campaigns



Contact us



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