THE WOMEN'S HEALTH CATALYST
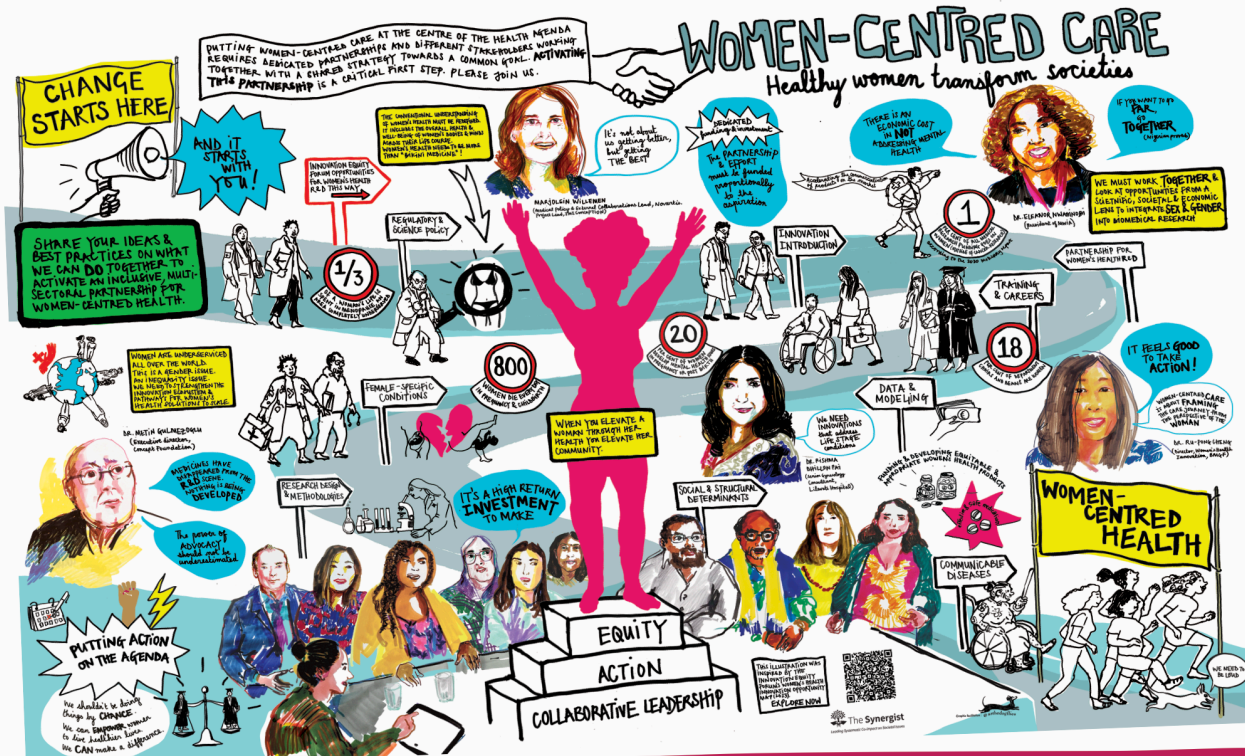
Partnering with women & communities to ensure universal access to the best possible health outcomes

The Synergist
Partner for greater societal impact

We bring patient engagement knowledge & expertise to women's health, and we bring the crucial issues of women's health to the patient engagement community.

PEOF2025
WOMEN'S HEALTH CATALYST: What If Patient-Centric Personalised Care Truly Reflected Women's Needs?

From Tailored Approaches in Shared Decision-Making to System Change

FROM INSIGHTS TO IMPACT
Based on the workshop insights, we identified that the patient community would value:

- **More inclusive, respectful provider-patient conversations**
  → Patients want healthcare interactions that validate their lived experiences—without requiring them to "push" to be heard.
- **Shared decision-making tools that reflect their real-life needs**
  → Patients value resources (e.g., checklists, symptom guides) that help structure discussions and enable informed, confident choices.
- **Recognition of life stages within a holistic care model**
  → Patients want clinicians to understand and respond to transitions like menopause, pregnancy, and adolescence, while ensuring care remains integrated and personalized—not fragmented by specialty or age.
- **Whole-person care that reflects the complexity of women's lives**
  → Beyond treating a diagnosis, women want care that considers mental, emotional, social, and physical factors—recognizing that health exists across contexts, not just conditions.
- **Ongoing collaboration with the patient community**
  → Women want to be active partners in shaping the system—through co-design, feedback, and sustained engagement.

BARRIERS TO RECRUITING & RETAINING WOMEN IN CLINICAL STUDIES

Asia & Oceania Region	Latin America Region	Europe/North America Region	Africa Region
Logistical Barriers: Lack of diagnostic infrastructure to run CS · Shortages of basic materials, (e.g. pipettes) · Workflow disruptions	**Logistical Barriers:** Limited access to transportation · Lack of childcare · Limited financial incentives	**Logistical Barriers:** Lack of specialists focusing on women's conditions · Lack of flexibility in study design that could ensure better women-centricity by accounting for diverse needs and lives realities	**Logistical Barriers:** Lack of infrastructure · Lack of transportation to clinical sites · Lack of housing options near clinical sites
Systemic Barriers: CS are not part of the routine of care, limiting dialogue on clinical research · Lack of region-specific data and regional representation in CS design	**Systemic Barriers:** Inconsistent care · Limited trust and continuity of medical conversations due to lack of a primary HCP in the public healthcare system · Clinical site competition due to fear of losing access to services if they commit to a clinical study	**Systemic Barriers:** Lack of lay language materials and/or their adaptation to cultural and language differences · Lack of resources, awareness and accessible information	**Systemic Barriers:** Limited adaptation of the study design to regional realities · Includes criteria not aligned with cultural/ social realities and needs · Lack of infrastructure · Lack of information on CS · Mistrust in the medical system / establishment · Patriarchal systems in some communities impose barriers for women to access CS
Situational Barriers: Religious/cultural stigma and patriarchal societies impose barriers for women to access CS · Lack of ownership by women of their own health.	**Situational Barriers:** Low prevalence of certain conditions (e.g., rare conditions leading to limited patient numbers per site) · Family responsibilities	**Situational Barriers:** Limiting inclusion/ exclusion criteria often clinical studies focus predominantly on women of reproductive age, with menopausal and older women typically excluded	**Situational Barriers:** Digital divide in rural areas.

We are looking for partners to co-create & pilot women-centric resources for care discussions & research in two or more condition areas!

Connect with Helena at
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We are on **a unique mission** to evolve women's health from isolated efforts to an integrated ecosystem, grounded in shared best practices.

Our Vision is that women throughout their life course have the best possible outcomes and quality of life.

FOLLOW US ON WOMEN'S HEALTH SYNAPSE

ACCESS THE ARTWORK HERE

Art illustration inspired by the IEF Women's Health Innovation Opportunity Map

Brought to fruition by The Synergist