



### In 2023, we released our Bright Paper report, Working together to support women's health.

The paper helped raise awareness of the gender health gap and the impact it can have on women's lives. It explained why there's a gap and highlighted ways employers could boost supports for women's health.

The Bright Paper had a particular focus on menopause. This is because untreated menopause symptoms can have a significant impact on women in the workplace. However, we know menopause isn't the only women's health issue that needs attention and support.

Through our research, we're now digging deeper into this health gap more broadly. Partnering with Ipsos, we heard directly from Canadian women on their health needs, challenges, and wants.

### There are many reasons for the health gap:

- An historical and continuing lack of research on women's health,
- Low awareness and understanding of how some conditions can manifest differently in women than men, and
- The stigma around discussing and dealing with women-specific health issues, such as reproductive and gynecological health.

The gap is concerning. Women make up more than 50% of the world's population. Yet women's bodies have been either ignored or treated as anomalies when it comes to research and health care. For this reason alone, addressing the health needs of women needs to be top-of-mind for any health system. Nevertheless, these systems continue to fall short – on more than just women-specific issues like gynecological and reproductive health. They fall short on all areas of women's health.

### **About our research**

We worked with Ipsos to conduct quantitative research in English and French between January 23, 2024, and January 31, 2024. We surveyed more than 1,400 employed Canadian women, aged 18 and older.

We also leveraged Ipsos's digital qualitative approach 3i for discussion and exploration of women's health and related issues. Through the Ipsos Conversations Community, we engaged 30 women participants between January 19 and January 26, 2024.

We assigned participants a set of activities over a period of three days. They completed the questions individually to eliminate group-think. The items were a mix of open-ended questions, images, and video responses.

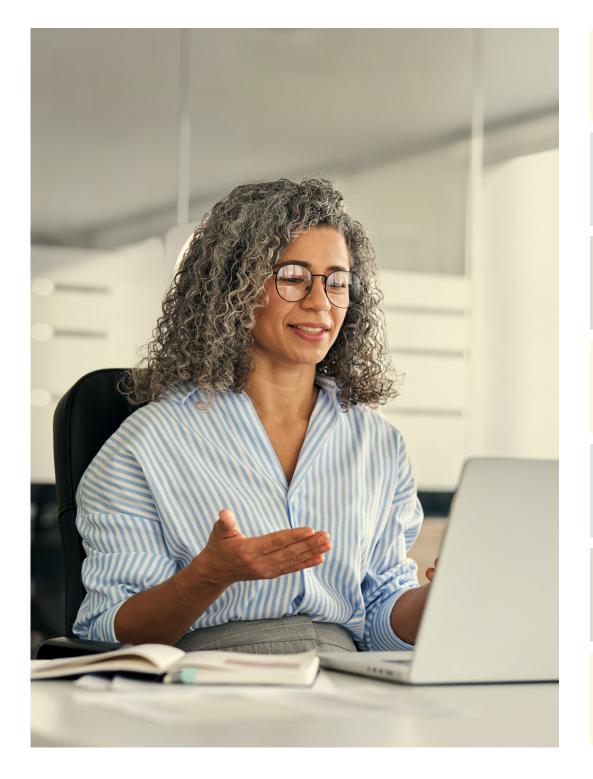
In all, each participant spent a minimum of 2.5 hours answering the questions. The research moderators monitored the boards and followed up with questions as required.

### Here are some examples:

- For women who give birth, 23% experience post-partum depression. But about 50% of women with symptoms are never diagnosed.<sup>1</sup>
- 3 out of 4 women experience menopausal symptoms that interfere with their daily lives.<sup>2</sup>
- According to the Heart and Stroke
   Foundation, half of women who experience heart attacks have their symptoms go unrecognized. They are also less likely than men to receive the timely treatments and medications they need.
- Over 40% of disability claims for women are for mental disorders, versus 30% for men.<sup>3</sup> Reasons can include the strain of multiple caregiving roles and the stress of reproductive health issues.

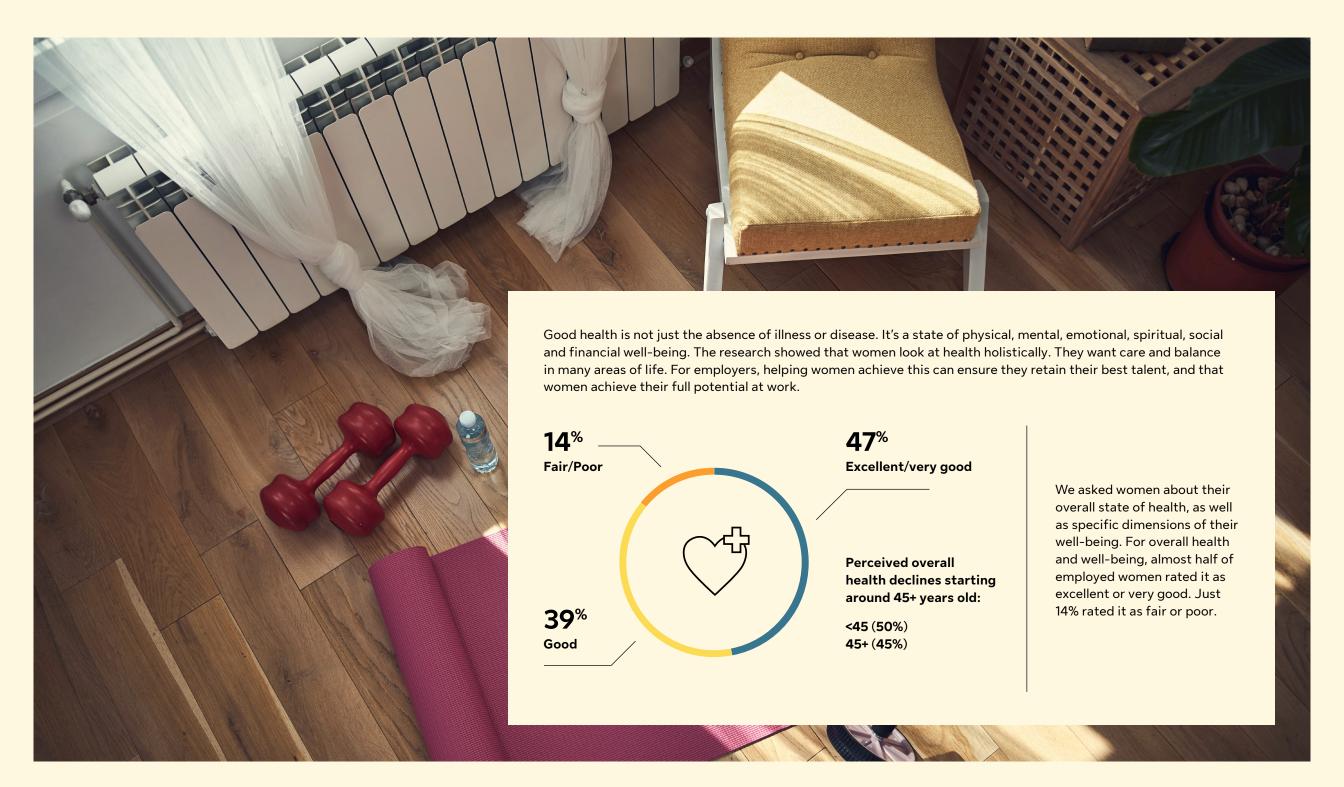
This gender health gap can have direct and profound workplace effects, including women reducing their work hours — and passing up promotions at the height of their careers. A recent study found that 10% of women left their job or were planning to because of menopausal symptoms.<sup>4</sup> The loss of talent and productivity can be significant.

Awareness and change have started – and organizations like the Menopause Foundation of Canada are doing great work. We want to accelerate this change, to better understand women's needs and improve supports for women in the workforce. That's why we undertook this research. It reflects input from a diverse range of working Canadian women. The results highlight supports that can make a difference. And they help us ensure that any solutions we put in place reflect the real needs of women.



-	Employed women felt most positive about their environmental well-being. They felt less positive about their physical, emotional and financial health.
$\dashv$	A majority of women ( <b>85</b> %) felt they still bear a greater burden of household and childcare responsibilities than men.
$\dashv$	When asked which health concerns were most important to them, <b>56%</b> of women said mental health. Mental health was the number one concern across all age groups.
—	<b>63</b> % of women are also concerned about chronic diseases such as migraines and other headaches, cardiovascular disease, osteoporosis and bone health and autoimmune disorders.
_	<b>60%</b> said that health issues around menstruation, menopause, and reproductive health could affect a woman's career advancement abilities.
_	There are gaps for many in both coverage and understanding the benefits they have. Only <b>46</b> % said their employer benefits cover mental health treatments. And <b>36</b> % say that their mental health benefits do not provide enough coverage to meet their needs.
	There was a lack of awareness regarding many benefits for women's health, such as contraceptive coverage, fertility treatments and menopause support.

## How women view health



### How women view health

financial future.

For the specific dimensions of health, employed women felt most positive about their environmental well-being. They felt less positive about their physical, emotional, and financial health.





### Mental health is the top health concern for Canadian women right now

When asked which health concerns were most important to them, 56% of women said mental health. It was the most important topic personally for women across all age groups.

In Canada, women have a 1.7 times higher prevalence of depression than men.<sup>5</sup> Not surprisingly, women also have higher rates of mental health practitioner claims. And since 2019, women's claims have grown more sharply

than men's. Overall, 40% of longterm disability claims for women relate to mental disorders, compared with less than 30% for men.

Two other issues that women across all groups frequently mentioned were gender inequality and cancer. Clearly, gender inequality remains a workplace reality for many. Employers have an opportunity to promote greater equality and attract and retain talent.

And the concern about cancer across all age groups reflects the increased incidence at younger ages. According to the Canadian Medical Association, cancer incidence has increased among both sexes in those younger than 50. Increases in pancreatic cancer have been noted among men, breast cancer among women, and colorectal cancer among both sexes.6

Women under 40 tended to list fewer top-ofmind health issues, with more emphasis on gynecological and reproductive matters. This finding isn't surprising, as the incidence of chronic disease is low among younger women. Furthermore, these women are in their prime reproductive years, so issues around fertility and reproductive health take priority. And those issues are rising. For example, the Canadian infertility rate was 5% in 1984. Today, the rate is between 15% and 25%.7 The ability to have open conversations and supports for these issues becomes more pressing.

#### 18-29

- Mental health (30%); anxiety (8%)
- Gynecological (19%)
- · Inequality (18%)
- Reproductive (15%)
- Cancer (10%)

For women aged 40 and over, hormonal issues related to perimenopause and menopause become more prevalent concerns. Three in four women say their menopausal symptoms interfere with their daily lives. This includes their work lives. That's why 10% of women leave their job or are planning to because of these unmanaged symptoms.8

They also had more concerns about chronic or episodic illnesses such as migraines, cardiovascular diseases, and osteoporosis. These concerns all relate to the increased incidence of these health issues as women age.

#### 30-39

- Mental health (32%)
- Reproductive (21%)
- · Inequality (19%)
- Gynecological (13%)
- Cancer (8%)

#### 40-49

- Mental health (27%)
- Peri-/Menopause, hormonal (19%)
- Reproductive (14%)
- Inequality (14%)
- Gynecological (13%)
- Cancer (12%)
- · Other chronic illnesses (11%)

#### 50+

- · Mental health (24%)
- Peri-/Menopause, hormonal (21%)
- Cancer (15%): breast cancer (11%)
- Inequality (14%)
- Other chronic illnesses (11%)



## 02

# Societal and workplace biases impact women's health



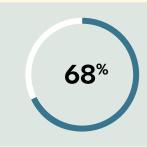
Societal expectations about a women's role have a measurable impact on women's health.

Four in 10 working women said they've made career-limiting decisions to care for their family or for health-related concerns. These include:

- Reducing the number of hours they work (25%)
- Changing jobs to ones that are less demanding (16%)
- Passing on an opportunity at work (12%)
- Giving up their job (10%).

These actions have a negative impact on several dimensions of health, including workplace well-being, financial well-being, and emotional well-being. They can also have a significant adverse effect on organizations, which lose the workplace contributions that these women bring.

#### Workplace biases can also play a profound role:



**68**% believed women are at a workplace disadvantage compared with men if they take a leave of absence.



Two-thirds (**67%**) of women said their age was a greater disadvantage for career opportunities compared to men.

The Menopause Foundation of Canada (MFC) notes that women are underrepresented in many senior roles. These include just 20% of Board of Director positions, 30% of federal government elected representatives, and 5% of CEOs. However, 62% of women surveyed believe that better workplace menopause supports would help overcome barriers to top positions.<sup>9</sup>



### Join the Menopause Works Here™ campaign!

Employers can join the Menopause Foundation of Canada's (MFC's)

Menopause Works Here™ campaign to champion menopause-inclusive workplaces in Canada. By joining the campaign, you'll receive:

- Menopause Works Here<sup>™</sup> digital logo, for use on your website and other digital channels;
- Communications from the MFC with information, resources, and opportunities to learn from other organizations' best practices; and
- Access to the MFC's Speakers'
   Bureau, leaders in menopause advocacy, for select internal speaking engagements.

As a participant in the campaign, you're encouraged to:

- Listen to the perspectives of menopausal employees to understand their experiences and need;
- Learn about menopause and its impact at work; and
- Act to find meaningful ways to support employees at this stage of life.

Together, we can help women in the prime of their working lives.

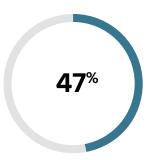
03

### Health supports are a key driver of job satisfaction

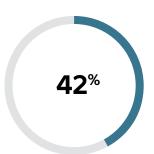


We wanted to understand the difference that health supports make in the workplace. In addition to our quantitative findings, we used the qualitative portion of the study to explore this further.

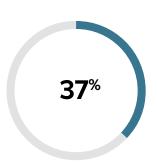
The research revealed that many women did not feel their employer supported their health:



 Only 47% said they were comfortable requesting accommodations for women's health (such as flexible work hours or modified workstations).



 Only 42% said there was an open culture for discussing women's health issues such as menstruation, menopause, and reproductive health.



 Only 37% said their employer provided adequate resources and support for women's health.



 29% felt the need to lie to their managers about why they were taking sick days for women's health issues.



 60% said that health issues around menstruation, menopause, and reproductive health could affect a woman's career advancement abilities.

These statistics reveal the significant issues related to women's health awareness and stigma in the workplace. There is a huge opportunity for employers to address this. By doing so, they can help ensure they're attracting, cultivating, and retaining the talent they need.





Workplace culture and respect.
 Support from colleagues and supervisors, particularly in times of illness or personal challenges.
 Respondents appreciated the understanding, respect, and care shown by their workplace community.



 Mental health supports. Access to counselling services, mental health resources, and supportive workplace policies.



 Flexibility and accommodations. The option for flexible work, time off for health and personal reasons, and accommodations for caregiving responsibilities.
 Some workplaces also provided support for maternity and parental leave. Examples of these include salary top-ups for maternity/parental leave and personal time off days to address family needs.



 Workplace benefits. Coverage for mental health services, counselling, disability leaves and medical treatments. Some workplaces also offered wellness programs, health courses, and resources for employees. Key actions for employers to improve supports for women's health include building awareness, reducing stigma and providing health education. These might involve workshops, training sessions, or conferences that focus on reproductive health, menopause support, and mental health awareness. These programs can build workplace empathy for women facing health issues. They can also create a more psychologically safe workplace.

### What a lack of support looks like

Women who felt their health was unsupported said this lack of support can take many forms. Here are some examples:

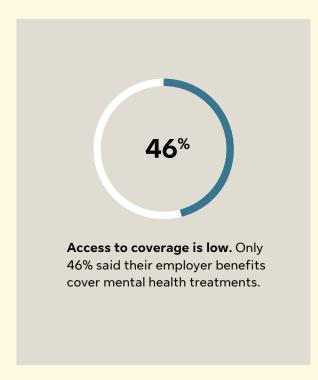
- Dismissed concerns, bullying and harassment. Experiencing gender-based workplace bullying, harassment, and dismissal of their health concerns. This included criticism for needing extra rest and recovery time. It also included a lack of privacy and understanding, with managers revealing personal health issues publicly.
- **Unsustainable work pressure.** Feeling pressured to work beyond their capacity due to high workloads and busy environments, leading to burnout.
- Lack of knowledge of women's health issues. Less understanding and support of women's health issues like menopause, reproductive health, and menstrual hygiene.
- **Inadequate benefits.** Paying premiums for health benefits that did not adequately cover their needs.

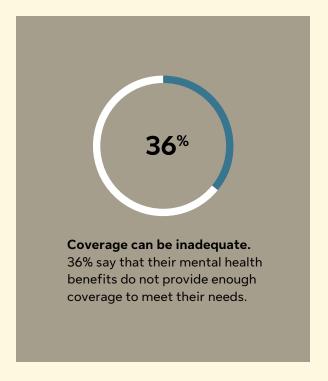
### 04

### Group benefits play a valued role in supporting women's health

For working women, a group benefits plan can play an important role in supporting health. Almost seven in 10 women said that their benefits plan met their needs. However, there can be gaps for many in both coverage and in understanding the benefits they have.

### Coverage for mental health treatments is a key example:





There's a lack of awareness of mental health benefits. Among those who say they have coverage, half said they do not know the amount covered. And almost one in five (19%) said they don't know if their employer offers coverage for treatment.

This knowledge gap extended to other benefits as well. A majority of women knew their core benefits coverage levels, such as prescription drugs, dental, and paramedical services like physiotherapy. But a consistent theme in the research was the much lower level of awareness of other benefits.





Specifically, there was a lack of awareness regarding many benefits for women's health.

- Contraceptive coverage (31% didn't know)
- Access to complementary and alternative medicine (27% didn't know)
- Coverage for people you consider to be the dependent (39% didn't know)
- Pelvic floor physical therapy (43% didn't know)
- Fertility treatments (42% didn't know)
- Family building (45% didn't know)
- Menopause support (43% didn't know)
- Breastfeeding support (46% didn't know)
- Gender-affirming surgeries (47% didn't know)

In addition, our qualitative research revealed that many women thought their benefits were underutilized. While they appreciated their plan, they said that many benefits or coverage levels were not relevant to their specific needs. They based this relevancy on factors such as life stage, health stage, and the needs of their family.





### What you can do

The perceived value of benefits decreases when women don't use benefits, or the benefits aren't relevant to them personally. There are actions you can take that can help.

- Communications. Create communications that clearly showcase the benefits and
  coverage levels available to women in your workplace. Our <u>Workplace Benefits DE&I</u>
  <u>Playbook</u> has suggestions on how to approach communications and make them more
  inclusive.
- 2. Adequate mental health coverage and access. Ensure that coverage for mental health therapies is enough to cover a full course of treatment. The Canadian Psychological Association recommends \$3,500 \$4,000 per year in mental health coverage. This amount provides cover for 15 20 sessions. This is the number of sessions required to achieve a therapeutic outcome for people suffering from depression or anxiety. It's important to communicate this coverage availability to employees. For smaller employers who operate under tighter cost constraints, virtual care can also help break down the barrier to mental health care. There are solutions like Lumino Health Virtual Care's Stress Management and Well-Being program that provide plan members with access to resources and specialists focused on mental health. Virtual care services also address some of the access barriers like time and location that many working women struggle with. They can access the service where and when it works for them.

Solutions like our Mental Health Coach, provided by CloudMD, take a personalized and proactive approach to mental health. The program engages employees who are the most at risk for mental health–related absences. They're prompted to access care before their symptoms worsen. Employees then work with a licensed health–care practitioner to create a personalized action plan.

3. Benefits flexibility. Provide a customizable plan that lets plan members tailor coverage to their specific needs. Health Spending Accounts and Personal Spending Accounts are two ways to do this. They help cover various health and wellness products and solutions such as breast pumps, menstrual products, ovulation test kits, incontinence supplies and alternative hormone treatments like wild yam cream or progesterone cream.

### Additional coverage that could help



As part of our open-ended qualitative research, we asked women what additional coverage they'd like to see at work. We also asked if they would be willing to pay more for additional coverages.

Half of women (49%) said they were willing to pay for more benefits for their health. And 53% said they would pay more to gain access to benefits for extended family members.

Here's some of the additional coverage that many women would like to see in their group benefits plan:



Women-specific supports. These included feminine hygiene products such as menstrual products, medication for period pain, and birth control methods like IUDs.



Pre- and post-natal care. This involved more comprehensive pre- and post-natal support, highlighting a desire for better care during this life stage.



Wellness and selfcare practices. These included coverage for massage therapy, yoga sessions, fitness memberships, and weight loss medications.

There was also a desire for more specialized health services for women such as fertility treatments like in vitro fertilisation (IVF) coverage.

## The benefits of supporting women's health



Women are essential to the Canadian economy, making up 48% of the workforce in Canada.<sup>10</sup> And they make up the majority of many critical front-line professions, such as health care and education.

Despite their essential role, working women aren't always finding the health supports they need. And because of this gender health gap, they are stepping back, stepping down and stepping away from their careers.

Increasing supports for women's health is more than just the right thing to do. It can also help you retain valuable talent, increase workplace productivity and decrease costs related to absences and leaves due to unsupported health issues.

### Start creating a workplace that supports women's health needs

We offer solutions that can help you increase support for women's health in the workplace.

Our Workplace Benefits DE&I Playbook outlines the resources available through group plans that can support women. It includes a checklist organized by life stage – making it easy to spot any gaps in coverage. In addition, our women's health webpage provides additional resources on how you can improve supports.







#### What's next

Sun Life will continue to raise awareness of women's health issues to help close the gender health gap. And we'll continue to promote and evolve health solutions that you can use to address women's health needs in the workplace.

We're currently funding an educational scholarship program through the Menopause Society. This provides an opportunity for qualified Canadian clinicians to earn the Menopause Society Certified Practitioner (MSCP) credential and will improve access to menopause specialists.

We're also exploring how we can enhance group benefits coverage for women's health providers and services.

Together, we can help working Canadian women thrive – and help you build a healthier and more productive workforce.

### **About this paper**

We have focussed this paper primarily on the health of people who identify as women and have a uterus. This includes people who experience physical and hormonal changes associated with biological female reproduction throughout their lifetime. However, some or all of this paper could apply to non-binary, transgender or two-spirit people who have a uterus.

We have further focussed this paper's theme on women's health in the workplace, and how employers can support it. We recognize there are many factors outside of the workplace that can significantly influence women's health. These include socio-economic status, race/ethnicity, social connections, sexual diversity, education, and rurality.

- <sup>1</sup> Carberg J. Statistics on postpartum depression. <a href="https://www.postpartumdepression.org/resources/statistics/">https://www.postpartumdepression.org/resources/statistics/</a>
- <sup>2</sup> https://menopausefoundationcanada.ca/
- <sup>3</sup> Sun Life data, Q1&Q2, 2022
- <sup>4</sup> https://menopausefoundationcanada.ca/
- <sup>5</sup> Albert PR. Why is depression more prevalent in women? J Psychiatry Neurosci. 2015;40(4):219-21. https://doi.org/10.1503/jpn.150205.
- <sup>6</sup> Brenner DR et al. Age-standardized cancer-incidence trends in Canada, 1971–2015. Can Med Assoc J. 2019;191(46):E1262–73. https://doi.org/10.1503/cmaj.190355
- <sup>7</sup> Bushnik T, et al. Seeking medical help to conceive. Statistics Canada Health Reports 23(4). https://www150.statcan.gc.ca/n1/pub/82-003-x/2012004/article/11719-eng.htm
- <sup>8</sup> https://menopausefoundationcanada.ca/
- <sup>9</sup> Menopause Foundation of Canada, Menopause and Work in Canada.
- <sup>10</sup> Statistics Canada, Labour Force characteristics, 2022

### Life's brighter under the sun

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