

The Director of Public Health Annual Report provides a picture of women's health in Grampian, it shows us how well women are and what is important to them in staying well.

The main report focuses on sharing data on women's health alongside women's experiences which are told through their voices and stories. The report also discusses what we can all do to move towards person-centred, preventative and inclusive care.

This is a short summary of what you can find:

What women tell us?

- Mental Health, Reproductive Health, Screening and Neurodiversity are areas where women want better information, help and support.
- Women want to be listened to, taken seriously and treated with dignity.
- Access to clear information and support is important.

What do we know about women's health?

Women in Grampian make up 51% of population; Life expectancy is 80-82 years with an average of 64.5 years in good health and 17 years in poor health.



There are significant inequalities:

- We see a 6-8 year gap in how long people live well for (healthy life expectancy) between women living in areas of deprivation compared to women who do not.
- Early deaths (premature mortality) are 2.4-2.7 times higher in women living in deprived areas.
- Inequalities are driven by poverty, disability, health, gender, education and employment differences.

Key challenges

- Women are more likely to experience anxiety, depression, and long-term distress.
- 1 in 5 women prescribed antidepressants.
- Neurodivergent women often diagnosed late or misdiagnosed
- Around 2 women died every day in Grampian in 2025 from CVD.
- Long waits and fragmented pathways persist in reproductive health; higher risks in deprived and minority ethnic groups are seen in maternity services.
- Employment, income, and caring roles significantly affect health - a large proportion of women work part-time (45.5%).
- Women and girls are more likely to face gender based violence which has life long impacts.



What works well

- Growing use of women's voices and stories (lived experience) in service design, with services being designed for and with women.
- Strong partnership working across NHS, local authorities, and third sector.
- Expansion of community-based and peer-led support - including nature prescriptions and community appointment days.
- Improved pathways in menopause care.
- Strong shift towards a population health and prevention model.

What's next?

Women's health is complex, unequal and shaped across life but we can make a difference. We will develop a Women's Health plan with partners recognising that improving women's health will benefit the whole population. We will continue to listen to women to better understand what is needed. We will use data to strengthen early intervention and prevention. We will work together to tackle inequalities.

We want to keep listening. If you are interested in women's health and want to be part of our next steps, please get in touch.

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Updates and resources:
 Director of Public Health's Annual Report