

Foreword

Making Women's Health Visible: From Healthy Beginnings to System Resilience

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Women consistently outlive men in nearly all regions of the world. Yet longer life does not necessarily mean better health. Increasingly, global health discussions recognize that women's health must be understood beyond reproduction and addressed through a broader, life-course, and systems perspective. World Health Day 2025 reframes “healthy beginnings” as a process that extends across the life course, rather than a moment limited to birth (1). Evidence shows that adolescence, preconception, and early adulthood are critical periods when nutrition, mental health, environmental exposures, and access to preventive services shape long-term risks of noncommunicable diseases, reproductive outcomes, and even the health of the next generation (2–3). At the same time, women's health outcomes are strongly influenced by how health systems are organised, financed, and evaluated (4). The 2025 World Health Summit further highlighted that women's health is closely linked to the resilience of health systems (5). When women's health needs are met, health systems are better equipped to respond to pandemics, climate-related challenges, and population ageing, while maintaining prevention and continuity of care. Academic and policy debates increasingly call for making women's health more visible (6). This requires better sex-disaggregated data, policies that acknowledge women's multiple social roles, and service models built around continuity rather than isolated episodes of care. Together, these global developments underscore that investing in women's health is not a marginal concern, but a strategic priority aligned with equity, sustainability, and system resilience.

With socioeconomic development and rising health awareness, women's demand for comprehensive, life-course health services continues to grow. However, important gaps remain and are largely invisible in routine health data, policy discourse, and service delivery models. First, ensuring maternal safety and further reducing maternal mortality remain priorities, alongside improved management of pregnancy-related complications and expanded premarital and preconception care, including prevention of mother-to-child transmission of key infections. Second, reproductive health challenges persist, including reproductive tract infections, sexually transmitted infections, infertility, unintended pregnancy linked to inadequate contraception, and the prevention and management of induced abortion. Third, girls and adolescents face nutritional imbalance, mental health concerns, unhealthy lifestyles, risks to reproductive function, sexually transmitted infections, and exposure to injury and violence. Fourth, as population ageing accelerates, demand for health services among older women is rising, particularly for osteoporosis, malignancies, metabolic disorders, and cardiovascular and cerebrovascular diseases. Fifth, the incidence of female cancers — especially cervical and breast cancer — continues to increase, requiring strengthened primary, secondary, and tertiary prevention. Finally, mental health problems are escalating across critical life stages, while chronic diseases driven by unhealthy diets, physical inactivity, smoking, and alcohol use have become dominant long-term threats to women's health.

China has made significant progress in women's health, consistently prioritizing maternal and child health within national development strategies (7). A robust legal and policy framework, including legislation on maternal and child healthcare, women's rights protection and health promotion, has established institutional safeguards for women's health. National strategies such as *Healthy China 2030* and *The Outline for the Development of Chinese Women (2021–2030)* prioritize maternal and child health indicators in performance monitoring. These efforts have resulted in significant improvements in key areas. Maternal, infant, and under-five mortality rates have declined steadily and now rank among the lowest in upper-middle-income countries. China has achieved the relevant targets of the United Nation's 2030 Sustainable Development Agenda ahead of schedule, and has been recognized by the World Health Organization as a high-performing country in terms of maternal and child health. Another major

advance has been made in the prevention and control of cervical and breast cancer. National screening programs have increased their reach, and free human papillomavirus (HPV) vaccination, following phased local and provincial implementation, has now been incorporated into the national immunization program (8). Control of mother-to-child transmission of human immunodeficiency viruses (HIV), syphilis and hepatitis B has moved from prevention to elimination strategies.

At the same time, there is a profound structural change taking place in women's health in China (9). Fertility patterns are changing rapidly, alongside a rapidly ageing population, while chronic diseases, mental health conditions and functional limitations are emerging earlier among women. In this special issue, we examine women's nutrition and anemia (10), menstrual health and abortion prevention (11), growth and developmental impacts of HIV-exposed children (12), chronic disease and management (13), perinatal care (14), and equity in service access, reflecting a life-course approach to women's health and providing multidimensional public health evidence to inform more comprehensive and equitable care. Making women's health more visible requires more than just expanding existing programs. It necessitates a change in how evidence is generated, how services are organized, and how success is measured. The launch of the 15th Five-Year Plan provides a vital chance to transition from minor adjustments to comprehensive redesign, integrating women's health throughout the life course into the fundamental principles of health system planning, quality enhancement, and equitable services.

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