

# UNCOVERING THE ONLINE DIALOGUE ON WOMEN'S HEALTH IN SCANDINAVIA

Women's Health  
Ipsos  
September 2024

# Thank you for taking the time to explore an important topic

At Ipsos Healthcare, we are committed to **listening to people, uncovering blind spots**, and building a bridge between people, healthcare professionals and the healthcare industry.

This commitment has driven us to run a self-funded study **exploring trends, challenges and unmet needs related to health discussed online** among women in Scandinavia.

The research explores real-world experiences shared by women on online platforms utilizing our **social intelligence** solutions.

The report offers a holistic view into the challenges and opportunities in women's health in Scandinavia, with a **thorough detailing of five selected, important themes**.

We acknowledge that men similarly suffer from health inequalities, and that's an equally important story to tell, however this report will be focusing on making our small contribution to the discussion on women's health.

Thank you for your attentiveness reading this report.



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# THE ONLINE DIALOGUE ON WOMEN'S HEALTH OUTLINED



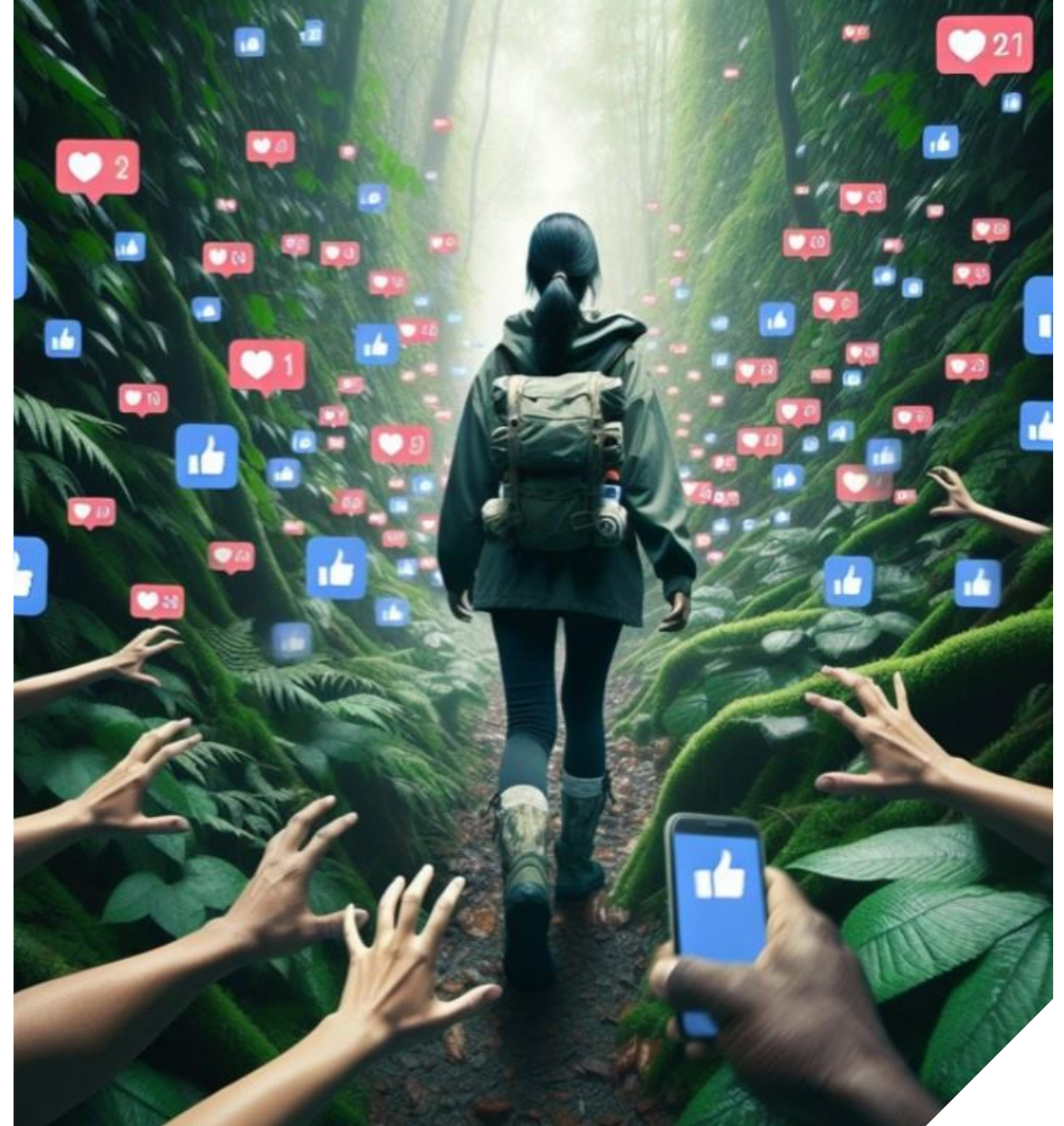
# The analysis was made through Ipsos Synthesio

Ipsos' proprietary social intelligence analysis tool, [Ipsos Synthesio](#), was utilized to analyse the data and define common themes to provide both transversal and specific market insights.

**Ipsos Synthesio supports user-centric decisions at scale by collecting, structuring, and analysing online conversations and behavioural signals.**

Our platform helps brands collect, analyse, and visualize data from over 800 million sources across 90+ languages and 195 countries. With AI-powered tools for cleaning and processing digital data, we, and our clients, can track conversations, topics, influencers, and trends being discussed online.

## Ipsos Synthesio





# We analysed ~365k relevant posts discussing women's health online: Two thirds of the conversation took place on forums

Women across Denmark, Norway & Sweden turn to social media to discuss their health experiences and seek advice from peers. In the 12-month period of our analysis a total of **~365k relevant posts were detected discussing women's health online.**

Slightly **more than 2/3 of these discussions took place on online forums demonstrating women's search for competent and relevant feedback** (e.g. ForumKvinneguiden.NO). Most forums allow the users to be anonymous, creating a more

intimate sphere where users are more open and honest about their challenges.

Similar to forums, Reddit has fully anonymous subreddits on niche topics, which has become a go-to place for many struggling with health aspects, sharing their questions and experiences and seeking help and support.

The online dialogue on X is more focused on politics regarding women's health as well as how the welfare states of the three countries are worsening. YouTube and Instagram account

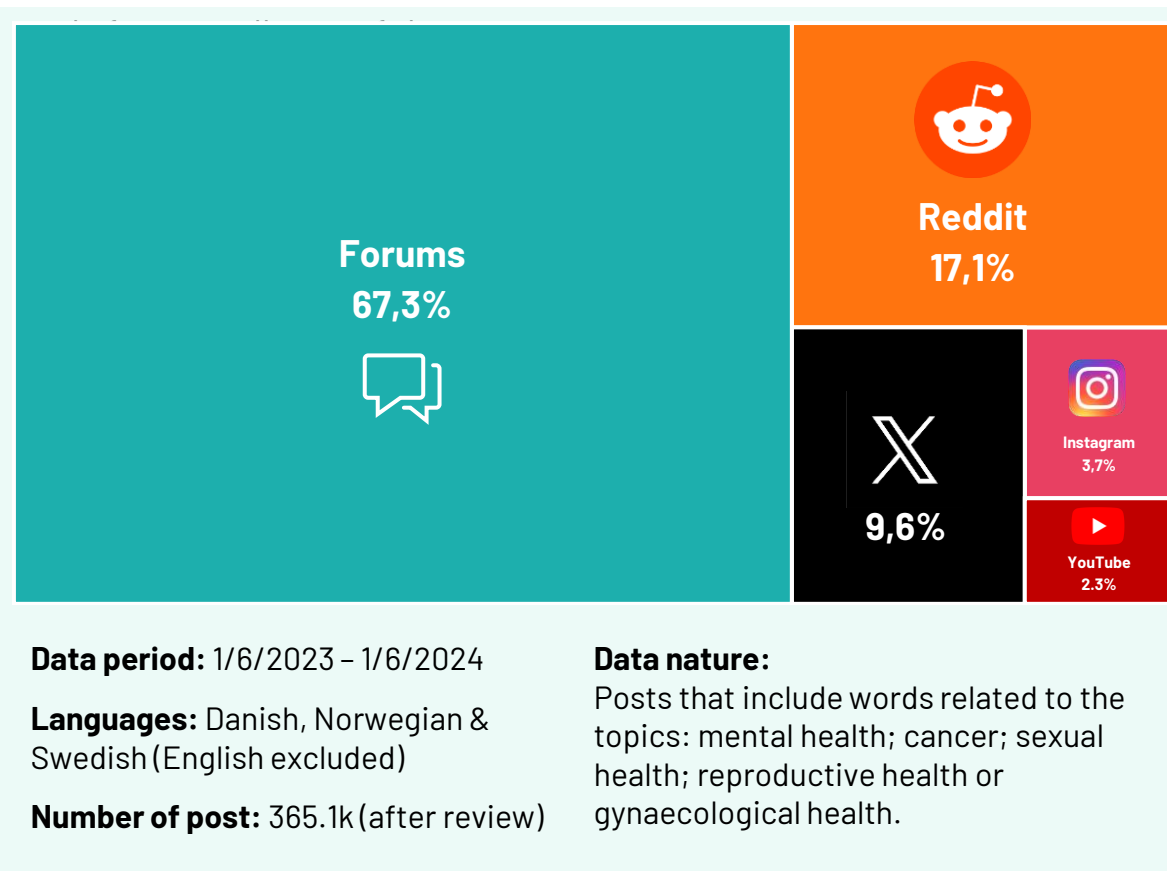


FIGURE 1: Share of mentions across sources

# We focused the research on 5 key themes identified in the online dialogue

## **Cancer**

Particularly female-specific cancers such as breast cancer and cervical cancer, is a significant health concern among women.

## **Gynaecological health**

Gynaecological health encompasses a range of issues, from common illnesses like yeast infections and UTIs to chronic conditions such as PCOS, and endometriosis

## **Sexual health**

Sexual health covers contraceptives, including birth control pills, IUDs, and condoms, as well as sexually transmitted diseases such as HIV and chlamydia. It also addresses topics related to sexual experiences, like painful intercourse, lack of sexual desire, and sexual education.

## **Reproductive health**

Reproductive health is a major topic, focusing on both the process of becoming pregnant—fertility, ovulation, and IVF — and the means of ending pregnancies, such as abortion and miscarriage.

## **Mental health**

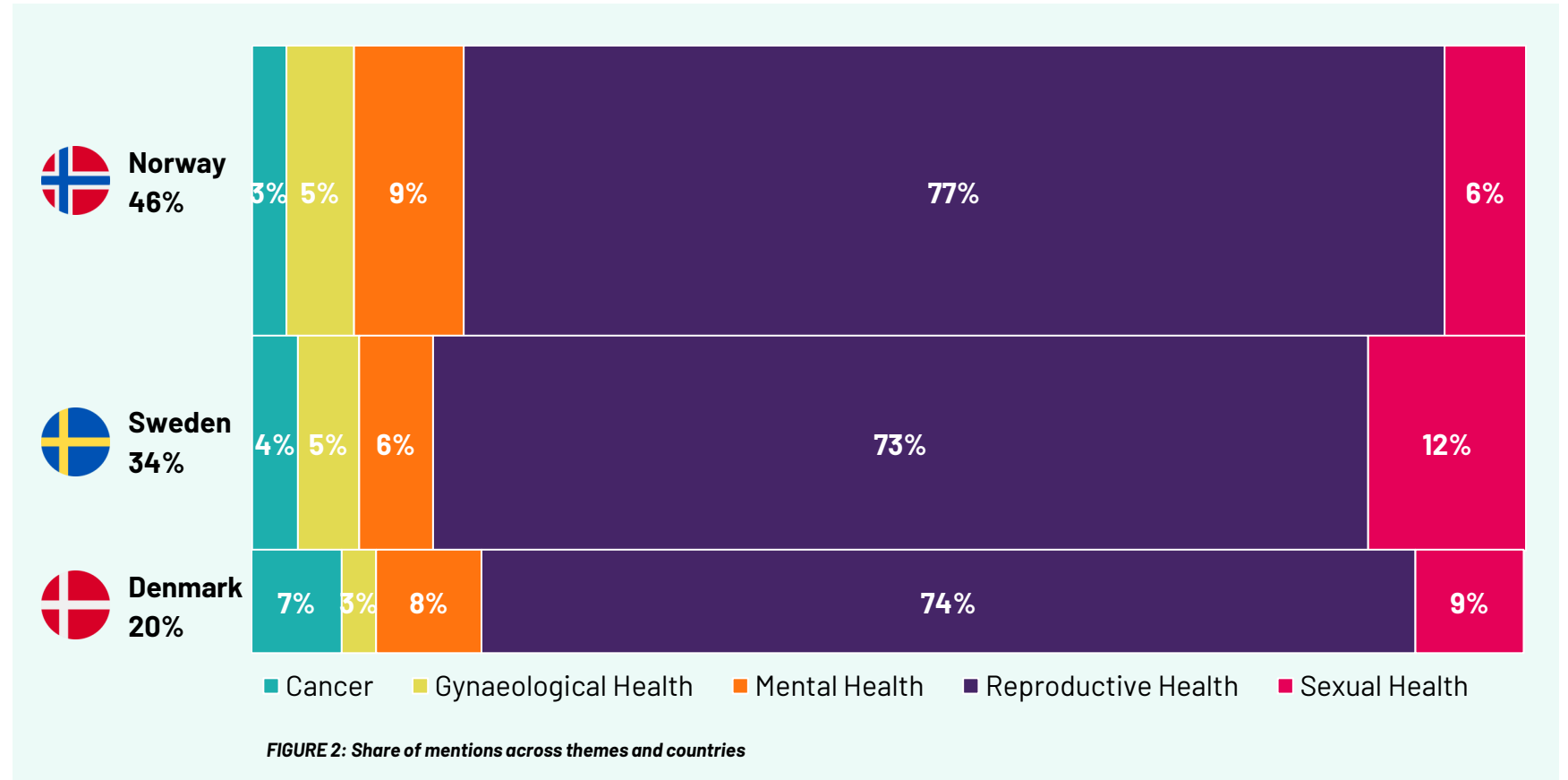
Mental health is another critical area, addressing mental illnesses alongside their symptoms. Neurodevelopmental disorders like Autism and ADHD, also fall under this category.

# “Reproductive health” is by far the largest theme in online health discussions across markets

Interestingly, Norway accounts for 46% of the posts identified in this study, Sweden 34%, and Denmark 20%.

Reproductive health emerges as the most significant topic across market covering 3/4 of all conversation across the countries.

Sexual health is notably more present in Sweden, whereas Cancer has relatively higher share of the online discussions in Denmark.





# Political changes, awareness campaigns and seasonality affect the volume of online dialogue across the key themes

**Online conversations on reproductive health spiked in March 2024** as France made amendments to their constitution supporting women’s access to abortions, before returning to a steady level.

**‘Pink October’** raised awareness and funds for breast cancer through various initiatives, which influenced the peak.

**Mental health peaked in winter months**, with dialogue revolving around women’s mental load during Christmas and winter depression.

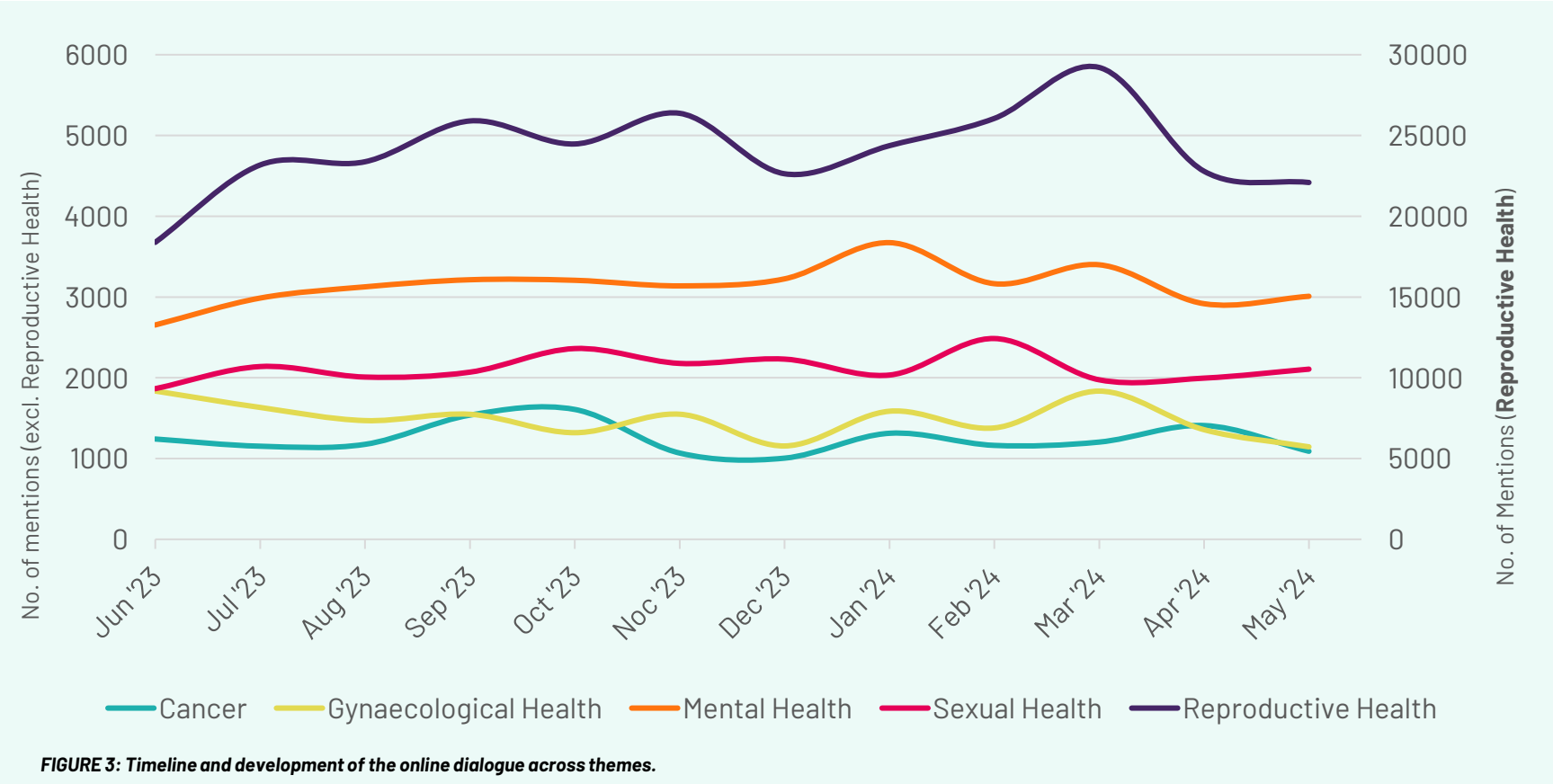
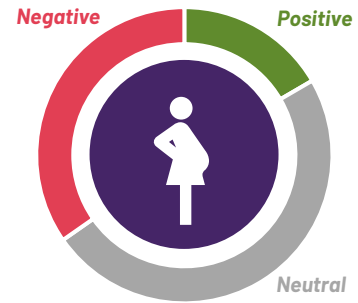


FIGURE 3: Timeline and development of the online dialogue across themes.

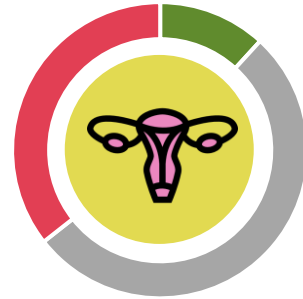
# A sentiment analysis shows that women's health discussions are more likely to focus on negative experiences than positive



## Reproductive health

*My reaction when I found out I was pregnant 🤰 Was the happiest and most confused 😊*

*Residues of 28 mm 10 weeks after abortion. I have no pain, but am still bleeding [...]. The gynecologist still wants me to have a scraping tomorrow! I am terrified and need some soothing words.*



## Gynaecological health

*Your best advice (PCOS): Lose weight permanently. It made all the difference to me. I lost 15 kilos 10 years ago, have no more problems*

*Do you also have endometriosis? Suffered from it for many years but is well now. A terribly painful disease. Hope you are doing as well as you can and have a good knowledgeable doctor taking care of you. ❤️ 👩*



## Mental health

*I found a private psychiatrist who helped me. [...] it is not because all one's problems are solved by getting a diagnosis, but it can be nice to have someone who can help you understand yourself.*

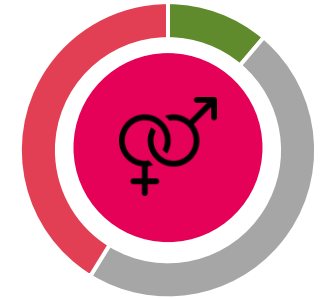
*[...] undiagnosed autism, and I would suggest talking to your psychologist about maybe looking into it. Know it's a long wait and frustrating.*



## Cancer

*A moment of relief comes every time the message; "no signs of breast cancer", after the mammogram every two years. 💕💕*

*I also have other symptoms that match the type of cancer, and would like to be screened and taken seriously. I'm somewhat shy of conflict, so I just need tips on how to be taken seriously. Should I bring my partner to help? If anyone also knows which tests I should request,*




## Sexual Health

*I am delighted as I do not think about birth control or periods at all in my daily life. [...] I'm glad I listened when the doctor said that the hormonal IUD is something completely different. Zero side effects.*

*Well not mini-pills, but the first few months after I had my IUD fitted, I was quite an argumentative bitch, pardon my French 😊😊*

FIGURE 4: Sentiment distribution of mentions across themes



**Now, let's look at  
*what* was discussed  
online.**



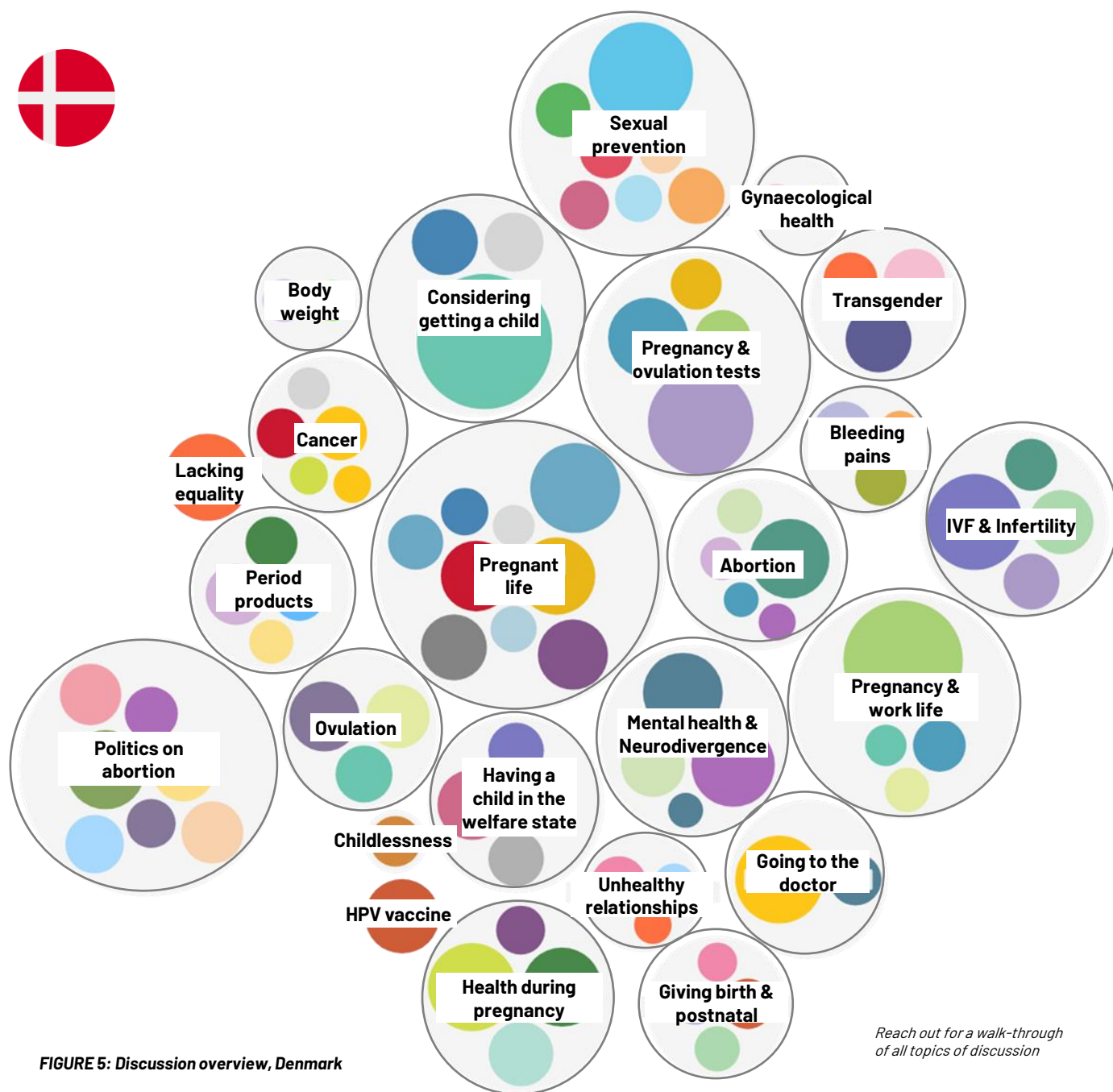


FIGURE 5: Discussion overview, Denmark

# Discussion overview

## Denmark

The Danish online dialogue on women's health encompasses a diverse range of themes.

The discussions delve into **various aspects of pregnancy**, including the journey of becoming pregnant, the health considerations during pregnancy, and the balance between pregnancy and work life.

There is also a **focus on reproductive health**, covering topics such as sexual prevention, ovulation, and period products, as well as the challenges of infertility and the use of IVF treatments.

**Mental health and neurodivergence are significant themes**, highlighting the

importance of psychological well-being alongside physical health

**The impact of societal structures** is evident in discussions about having a child within the welfare state.

**Health-related concerns** such as cancer, gynaecological health, and body weight are also prominent. Additionally, the conversations address the complexities of giving birth and postnatal care.

Other critical areas include the implications of unhealthy relationships on women's health and the experiences of those seeking medical advice.

Reach out for a walk-through of all topics of discussion



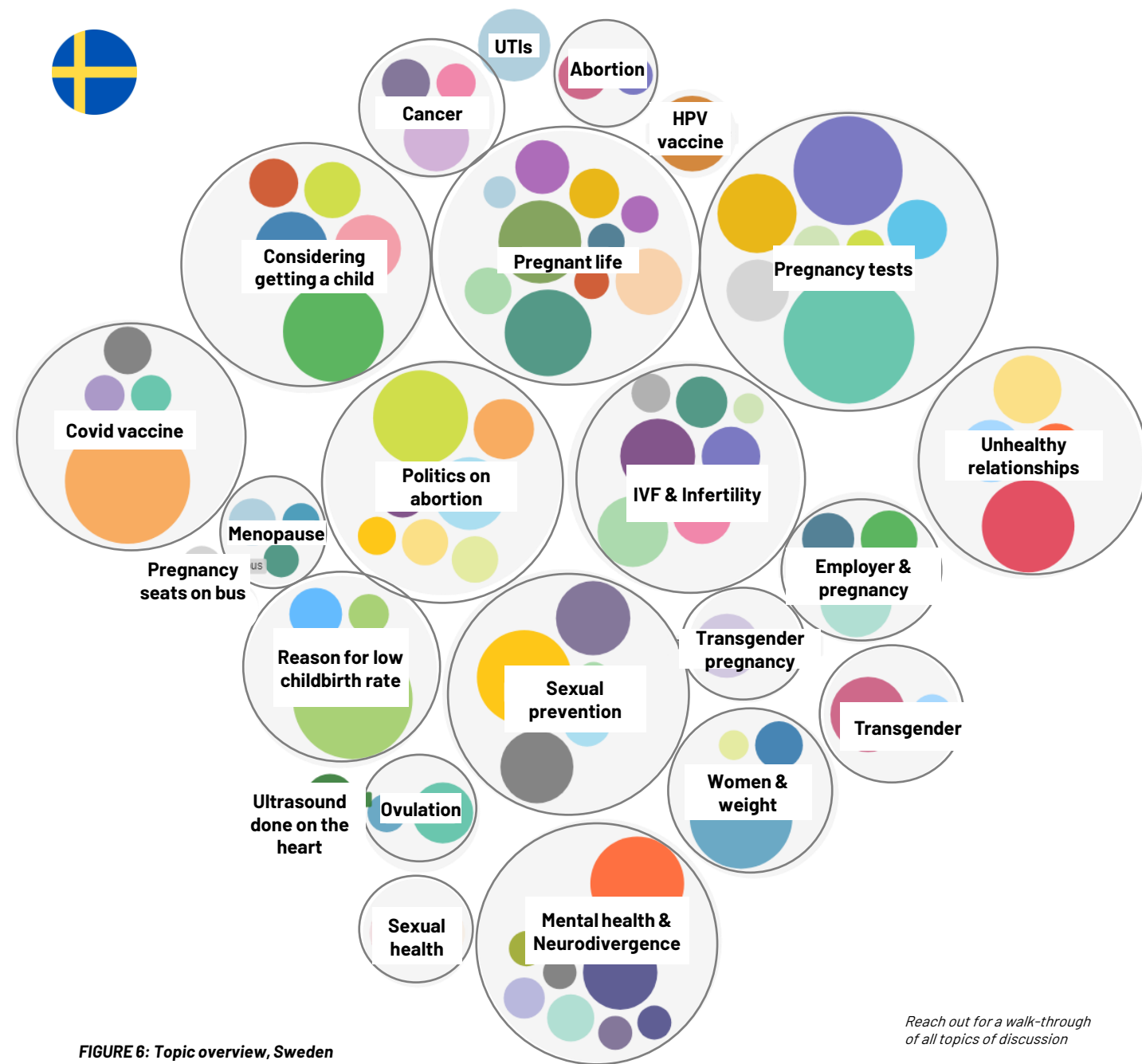


FIGURE 6: Topic overview, Sweden

# Discussion overview Sweden

The Swedish online dialogue similarly **focus on reproductive health**, which includes discussions about pregnancy, the considerations and challenges of starting a family, and the complexities of infertility. Reproductive health is also a political topic, that is discussed.

**Preventive health measures are another prominent topic**, including conversations about vaccines and sexual prevention.

The dialogue also brings attention to **health conditions that affect women**, such as breast cancer, mental health issues, and neurodivergence, highlighting the need for awareness and support for these conditions.

Discussions also address **body image and weight concerns**, underscoring the societal pressures and health implications associated with these issues.

The **inclusivity** of the dialogue is noteworthy, as it acknowledges and addresses the health concerns of transgender individuals, including transgender pregnancy.

**Life stage-specific health issues**, such as menopause, are also explored, providing insights into the unique health challenges women face at different stages of their lives.

Reach out for a walk-through of all topics of discussion

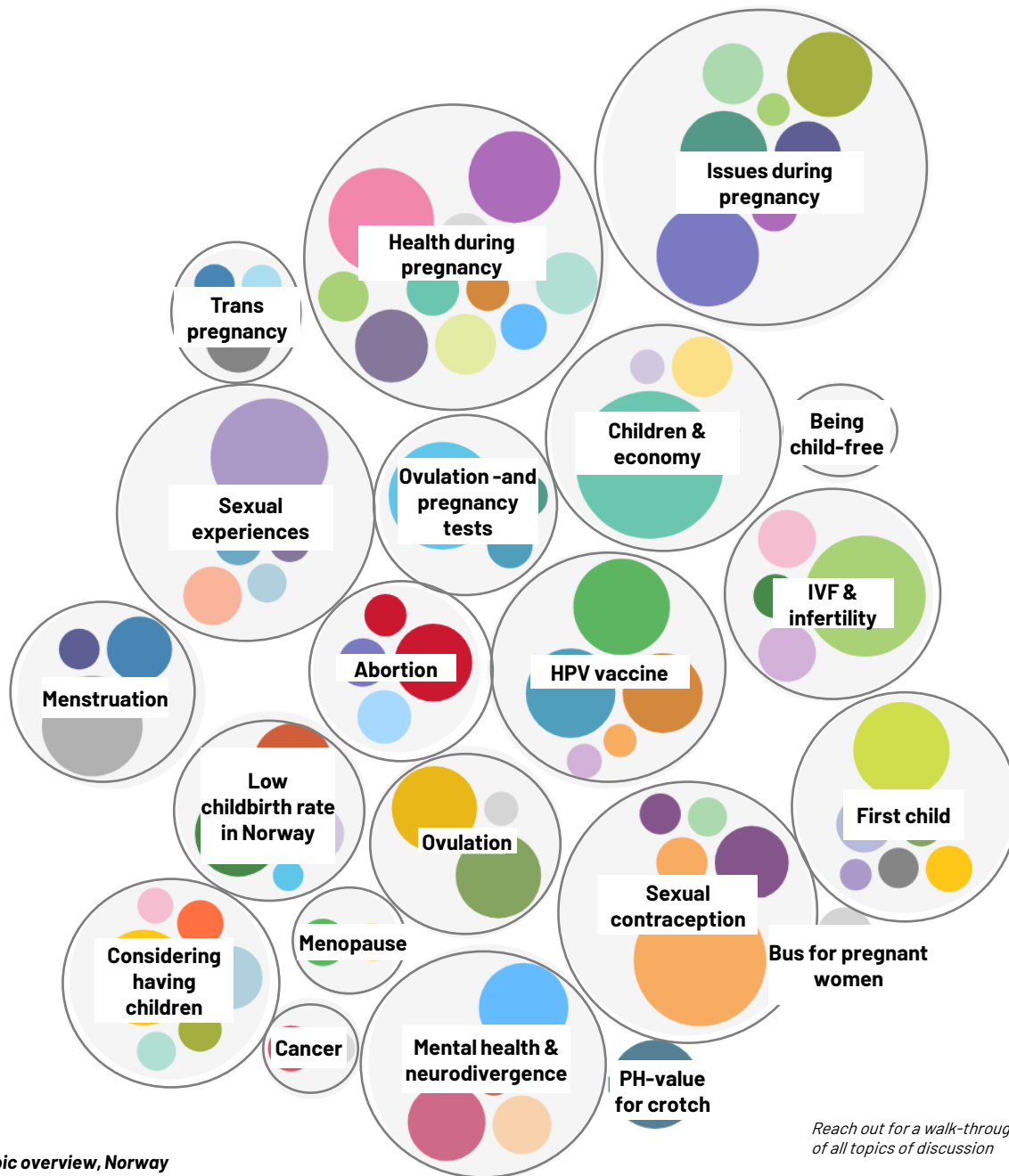


FIGURE 7: Topic overview, Norway

# Discussion overview Norway

Central themes in the Norwegian discussions include the **physical and emotional experiences of pregnancy and the different stages of reproductive health** throughout life. The unique **experiences of trans pregnancy** are also discussed

There is also a **significant focus on sexual health**, including contraception and sexual experiences, as well as reproductive technologies and choices such as IVF & abortion.

**Socio-economic factors related to parenthood** are another key area of discussion, particularly the financial implications of having children and the country's low childbirth rate ([1.4](#)).

**Mental health and neurodivergence** are highlighted, emphasizing the connection between mental well-being and women's overall health.

In addition to these core themes, the dialogue encompasses **broader health and lifestyle issues**.

**The challenges and perspectives of being child-free** are explored, as well as concerns about cancer, which remains a critical health issue for women in Norway and across Scandinavia.

*Reach out for a walk-through  
of all topics of discussion*

# The key discussions vary across the Scandinavian countries

## Discussions on unhealthy relationships and domestic violence is more common in Denmark & Sweden

Discussions on interpersonal relationship issues, ranging from day-to-day conflicts to infidelity, breakups, and emotionally and physically abuse show up in DK & SE.

Sexual assault, rape, victim blaming, and justice challenges, further show up in discussions with frustration towards men's behaviour and the current legal framework.

Denmark and Sweden has implemented consent-based law in recent years, which may have diffused into the online health dialogue.

## Discussions on sexual experiences and norms is more prevalent among Norwegian women

Discussion of sexual experiences, preferences and perceptions on sexual norms are more present in online discussion in Norway.

Body image perceptions are reflected upon as playing part in feeling comfortable during sex, as well as how health related issues (e.g. childbirth or menopause) affect sex-life.

Societal expectations and the influence of pornography are criticised, while gender differences in sexual satisfaction is discussed as being unfair.

## Norwegian and Swedish women show more concerns about the countries' low birth-rates

The low birth-rate is discussed across Sweden and Norway, focusing on the need to boost fertility to sustain culture and welfare.

In Norway, the low birth-rate is linked to high living costs, and lack of economic resources to take care of a child.

In Sweden, concerns focus on economic challenges and the need for better family and housing policies. Moreover, environmental concerns were discussed as a reason to consider not having children.

## The new legislation on abortion show up in discussions in Denmark

In May 2024, a new limit for abortion got extended from 12 to 18 weeks of pregnancy.

While some discuss it as a victory for women's rights in Denmark, others are questioning the necessity. Concerns centre around whether it will push to new norms, and impact people to be more careless.

The new legislation also raises ethical debates, e.g. between a mother's rights and a fetus's right to live.

## The HPV vaccine is a large topic among Norwegian women online

Discussions emphasize the importance of the vaccine, including debates on the inclusion in public programs. Some express disappointment about not receiving the vaccine due to their birth year or lack of awareness..

Anecdotes, knowing someone who got cancer, are shared to promote the vaccine. Yet, many discussions also cover negative experiences with adverse events, and scepticism about benefits and long-term safety.



A photograph of two women sitting at a wooden table in a cafe. The woman on the right, with long brown hair, is looking down at a smartphone in her hand. She is wearing a black and white striped shirt and a black watch. The woman on the left, with blonde hair, is looking towards the right. There are two white coffee cups on the table, one with a dark coffee and one with a chocolate drink. The background is blurred, showing a cafe interior.

# Trending topics and unmet needs across the 5 key themes



# Trends in discussions on Reproductive Health

## 1 → Fertility tracking technology

The use fertility tracking apps to track their menstrual cycles, ovulation and generally optimize the chances of conception is a trending discussion topic across countries.

## 2 → Taking control through increased understanding

Generally, we observe that women are seeking empowerment and control of their hormonal health through knowledge and education on their menstrual cycle, fertility, and menopause.

## 3 → Holistic approach

Scandinavian women demonstrate a holistic approach to conceptions, discussing the use of supplements and focusing on lifestyle when trying to conceive.



*Keeping track of the menstrual cycle and how regular it is can prove to be a method that works well. You should use an app (iOS has it well built into "Health" these days, but we used helloclue.com in the past)*





# Unmet needs in reproductive health: Women are seeking knowledge and support

## Uncertainty on how best to improve health before, during and after pregnancy

Women looking to get pregnant, show uncertainty on how to optimize their body for conception, discussing the use of supplements and alternative treatments. These discussions continue during and after pregnancy, demonstrating a lack of clear guidance.

## Need for better post-partum support prevalent in discussions

Women discuss the need for more support after giving birth, especially when struggling with depression or generally taking care properly of themselves.

## Lack of understanding on how to navigate menopause

Many women online express a need for more information and resources on menopause to better navigate this life stage with confidence and support.

## How long should I endure FSH?

Many women struggling with fertility are looking for answers to when they should give up and stop using hormonal treatment, particularly if they've had miscarriages.

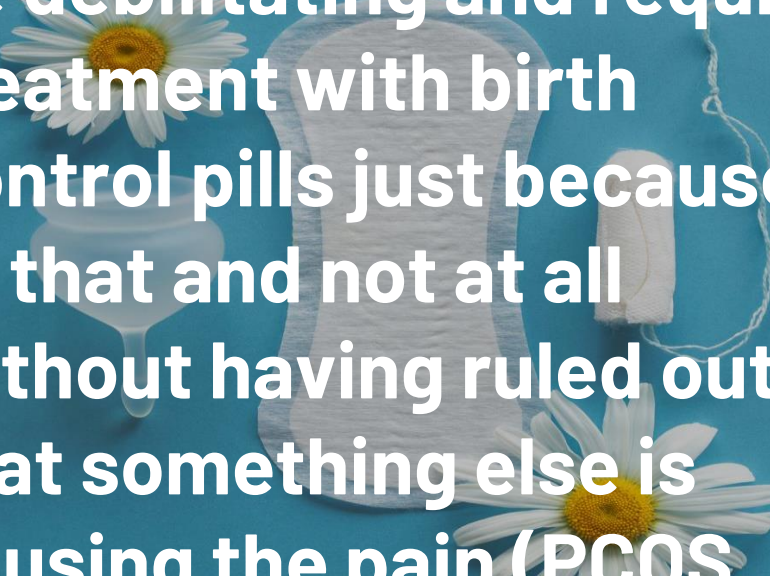
## How and where to get IVF?

A key topic of discussion is whether to go for private or public sector IVF treatment, discussing both price and

access. Many discussions revolve around solo moms.

*Could you have had postpartum depression? Not everyone is aware that they have it. As others have mentioned, the hormones can play tricks on you, as well as all the overwhelming feelings of becoming a mother*

Yes, menstrual cramps can be bad. But they should not be debilitating and require treatment with birth control pills just because of that and not at all without having ruled out that something else is causing the pain (PCOS, lichen or something else)



## Trends in discussions on Gynaecological health

### 1 → Awareness of endometriosis & PCOS

Women discuss and advocate for better diagnosis and treatment options for endometriosis & PCOS, seeking and sharing advice to diets, and discussing the use of various tracking apps.

### 2 → Menstrual wellbeing

Women in Scandinavia are seeking products and services that cater to menstrual health, such as sustainable period products, menstrual tracking apps, and menstrual health education.

Motivated by the desire for a more positive and informed menstrual experience, women online explore and discuss emerging products like period underwear, menstrual cups, and organic menstrual care products.





# Unmet needs in **gynaecological health**: Uncertainties centres around PCOS & endometriosis

## **Better understanding and recognition of gynaecological symptoms (HCPs & society)**

Women online explain how they are frustrated by healthcare professionals' lack of understanding and proper investigation into gynaecological symptoms, potentially leading to misdiagnosis and delayed treatment for conditions like endometriosis.

Similarly, many online discussion also show women look for education and knowledge to better understand and manage endometriosis and PCOS.

## **Better access to PCOS & endometriosis treatment**

Women struggling with PCOS and endometriosis diagnoses struggle to get treatment and share how the diagnoses affect their lives, as well as looking for cures and solutions.

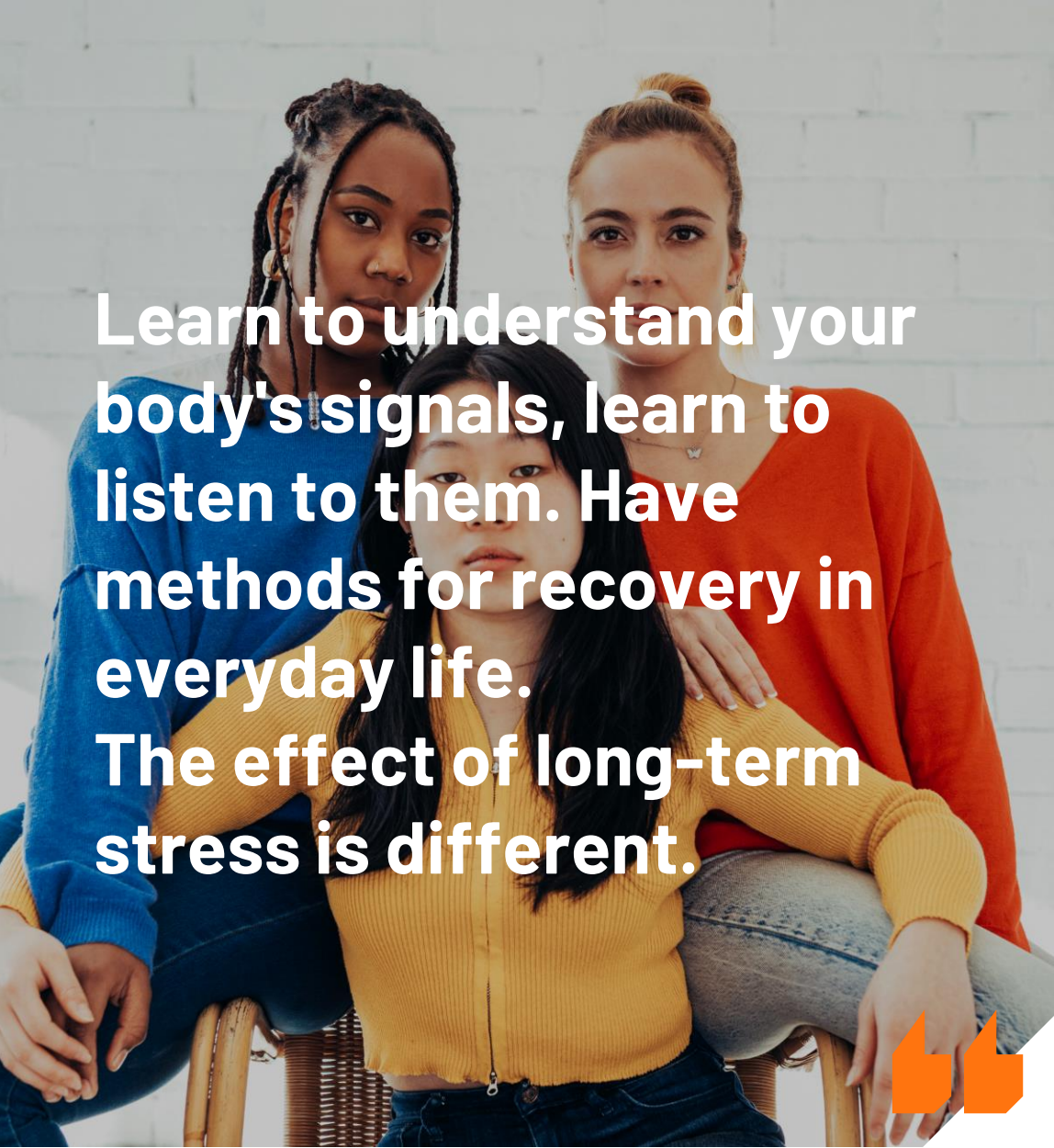
## **Better support for chronic gynaecological conditions**

Women online express feeling a lack of support from HCPs for chronic gynaecological conditions, impacting their emotional well-being and treatment adherence.

## **Exploring opportunities for a more holistic approach**

Online discussions show women search for, and discuss alternative treatments, nutritional guidance, and lifestyle interventions to effectively manage their gynaecological health.





Learn to understand your body's signals, learn to listen to them. Have methods for recovery in everyday life. The effect of long-term stress is different.

## Trends in discussions on Mental health

### 1 → Holistic approach

Women are exploring holistic approaches to mental health, such as mindfulness, meditation, yoga, and alternative therapies, to address their mental well-being.

### 2 → Technology

There is a tendency for women to utilize technology for mental health support, including mental health apps, online therapy platforms, and virtual support groups.

### 3 → Preventive Strategies

There is a trend for women to focus on preventive mental health strategies to maintain their well-being. This includes early intervention, stress management techniques, and regular mental health check-ups.



# Unmet needs in **mental health**: Challenges accessing timely and affordable therapy in focus

## **Better access to timely and affordable therapy is a key part of mental health discussions**

Women express difficulties receiving the mental health treatment they need. The long wait times for therapy show in online discussions, with women seeking reduced wait times to receive timely support for their mental health concerns.

Many women also share experiences of their mental health concerns not being taken seriously by HCPs, adding to the difficulties accessing therapy.

Further, women discuss the costliness of therapy and seeking more affordable solutions.

## **Calls for better awareness and less stigma**


Women online express a need for initiatives and conversations about mental health to reduce the stigma, increase awareness of symptoms and encourage people to seek help.

## **Desire for more individualized care within mental health**

Online discussions also see women asking for treatment plans tailored to their needs and preferences to ensure more effective outcomes.

*I wish that you'll get the opportunity for real therapy despite waiting times and price. Because you have heavy luggage.*

*The only downside to the health center is that you have to have serious enough problems to get help. [...] My own experience when I have applied there for depression is that they first had to do an investigation which takes time.*



I myself use the Ovy app and a Beurer thermometer that was made for the app, and it seems to include a 1-year subscription to Ovy. Most apps of this type also have a partner app so you know when to use a condom :)



## Trends in discussions on Sexual health

### 1 → Hormone-free living

Scandinavian women show increasing interest in non-hormonal contraception, that allow them to protect their sexual health, without disturbing their hormonal balance.

### 2 → Empowering sexual education

Sex and sexual health seem to become less taboo for women, as they share their knowledge and experiences, emphasising the focus and importance of a healthy and empowered approach to sexuality.

### 3 → Sexual wellness

Discussions reveal an increased importance of sexual health, enjoyment and wellness among women. The prevalence of sexological counselling and use of sexual wellness products further emphasise this importance.



# Unmet needs in **sexual health**: Pursuing sexual wellness and non-hormonal contraception

## Search for solutions to address challenges to sexual wellness

Women online express support for solutions to address challenges to sexual wellness such as low libido or pain during intercourse.

## How to address vaginal dryness in menopause

Women going through menopause discuss vaginal dryness, and how it's not commonly talked about openly.

## Search for non-hormonal contraception

Online discussions show women looking for reliable non-hormonal contraception. The discussion are

often linked to potential side effects of hormone-based contraception and their effect on the natural hormonal balance and menstrual cycle.

## Calls for less stigma on women's sexual health & better education

While we observe a trend emphasising sexual empowerment, some online discussions still include women calling for less stigma surrounding women's sexual health.

Further, some women also show a lack of knowledge on how HPV and HIV are contracted and how to properly protect themselves during sex.

*I think that hormonal contraception is outdated, and it's time to develop methods that don't make women sick.*

*Us women probably don't want to get older, or get menopause symptoms, but those of us who are realistic know that it will come anyway. We just have to deal with it. Dry vagina occurs [...] If I'm dry, it doesn't mean I'm not horny or don't want sex. But it is an advantage to be a little open and use aids. My mother never talked to me about the menopause, so what I know I have learned from friends.*





# Trends in discussions on Cancer

## 1 → Self-examination

Women seem to be introducing self-examinations of their breasts into their routines, inspired by initiatives such as Klämdagen (*"the Squeeze Day"*).

## 2 → Getting Tested

Women are sharing experiences on getting pap smears for HPV and discussing the advancing technology that can detect cancer in earlier stages than previously.

## 3 → Genetic testing kits

Testing kits that allow women to identify their hereditary risks of cancer are trending, providing a sense of calmness and control.



I love the development of technology when it benefits us all. Better tests, longer screening intervals enabling society to save precious time with doctors, and give far less unnecessary hassle for women



# Unmet needs within **cancer**: Going beyond the medical treatment and promoting early detection

## Holistic cancer care going beyond the medical treatment

Women online are looking for holistic cancer care, comprising emotional support, nutritional guidance, and complementary therapies alongside conventional treatments.

The discussions also reveal a desire for proper, nutritious food while being hospitalized, supporting their recovery.

Further, many women also ask for more empathy from HCPs e.g. in cancer screenings.

## Calls for more focus on early detection

The online discussions see women advocate for more focus on early detection through increased awareness, educational campaigns and more regular screenings,


Interestingly, we also observe women with mobility challenges discuss the lack of access to healthcare facilities resulting in less frequent screening,.

*Got a few hours' leave, went home and ate with the dogs and got myself some PROPER food [...] It is disastrous that sick people are largely served starchy/flourish food instead of plenty of fresh vegetables, berries and clean meat/fish food. You don't get healthier from starch and ultra-processed food...  
#breastcancer*

# **KEY ONLINE DISCUSSION: WHAT SHOULD WE CONSIDER NORMAL?**







**"The historic underrepresentation of females in trials has contributed to the relative deficiency in knowledge on the prevention strategies, disease manifestations, prognosis, and treatment of disease in females."**

Medical News Today, 2021

## Historic underrepresentation of research on women in medicine show repercussions

**Historically, clinical trials have often excluded women**, partly because their hormonal fluctuations made them more unpredictable research subjects. Regulation and costs of research similarly led to a deprioritization of studies focused on women's bodies ([PharmPrac, 2016](#)).

However, over the past decades, extensive effort has been put into limiting gender bias in health research, e.g. through the EU's regulatory framework for gender equality in research ([European Union, 2021](#)).

**Knowledge gaps however persist**, as much health research builds on preexisting studies, primarily focused on men ([Andersen, 2024](#)). Further, therapy areas that are more prevalent among women, e.g. migraine, still show a lack of gender-specific research (Sun et al., [2023](#)).

Although not necessarily linked, current medicinal health inequalities e.g. show in an overrepresentation of women in ADR reporting ([Al Meslamani, 2024](#), [Watson et al., 2019](#)).

# 89%

**of drug-ADR\*  
combinations with  
gender-differentiated  
reports are more  
common in females**

[Al Meslamani, 2024](#)

\*Adverse drug reactions

# 60.1%

**of 15+ million ADR  
reports analysed  
globally concern  
women**

[Watson et al., 2019](#)



**Uncertainties on  
what should be  
considered 'normal'  
is prevalent in  
online health  
discussions**



# Defining normality in a complex body can be difficult

**The complexity of the female body, stemming from cyclical hormonal changes and evolving reproductive stages, often leaves many women asking: "Is this normal?"**

The female reproductive system is a labyrinth of hormonal interplays and physiological shifts, which span a woman's lifetime and culminate in menopause, bringing its own set of health challenges.

The menstrual cycle involves fluctuations in hormones like oestrogen and progesterone,

which impact mood, energy level, and overall health. These hormonal shifts also increase the risk of developing conditions like osteoporosis.

Furthermore, women's symptoms of certain condition often vary from men's, and hormonal changes can affect their response to medication.

This complexity underlines the uniqueness of each female body, further complicating the understanding of what's considered "normal".



**When it comes to women and their bodies, we still tend to link many symptoms that women experience back to their reproductive organs, or if not reproductive organs, then the general state of 'being female'.** ([Hysterical Health](#), Ipsos)



# So, many women are finding their own answers online

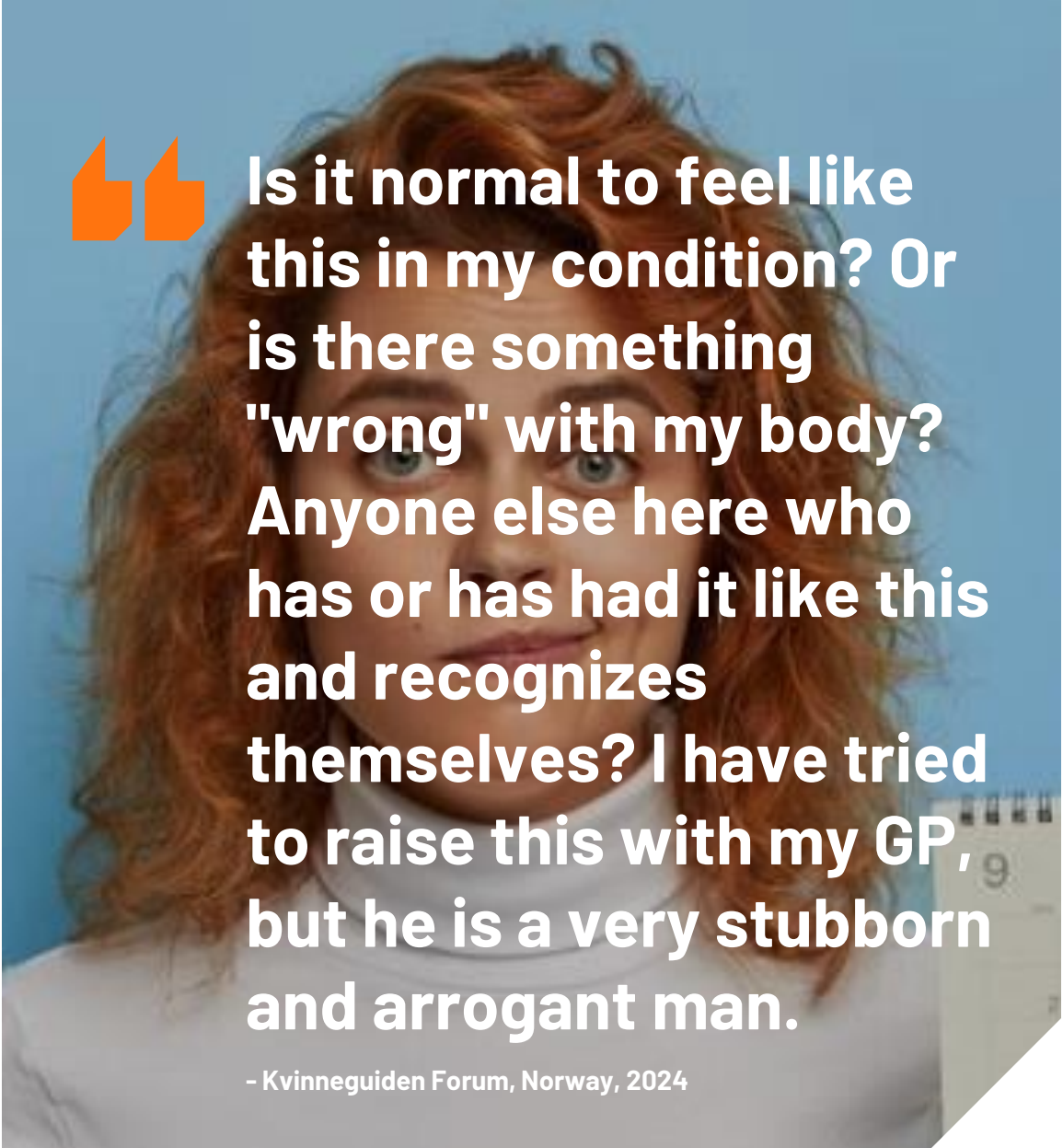
Women across Scandinavia turn to social media to discuss their health experiences and seek advice from peers. In the 12-month period of our analysis a total of **~365k relevant posts were detected discussing health online by women in Scandinavia.**

An overarching theme among women is the **uncertainty of 'what is normal,' and what symptoms should simply be accepted as part of womanhood.**

This challenge is e.g. experienced in meetings with health care professionals, where many

women experience that symptoms are linked to hormonal fluctuations, the reproductive system, or shrugged off as a mental issue leading to the women **feeling dismissed or not taken seriously**, potentially resulting in unnecessary symptom acceptance, repeated doctor visits and treatment delay.

Engaging in online discussions may thus be a way of seeking information, validation or discussing symptoms.



Is it normal to feel like this in my condition? Or is there something **"wrong" with my body?** Anyone else here who has or has had it like this and recognizes themselves? I have tried to raise this with my GP, but he is a very stubborn and arrogant man.

- Kvinneguiden Forum, Norway, 2024



# **Women online share experiences of health concerns not being taken seriously at HCPs**



# 46.7%

**of Danish women have experienced not being taken seriously at their GP, compared to 29,2% of men. 58% among women aged 18-29.**

Aller Media, 2023



# Three common stories show how women experience not being taken seriously

## Belittling physical symptoms as mental health problems

"I have gone through a long dance with a doctor who thought that I was really just mentally ill. I had actual swelling in several joints over several weeks/months. I had trouble moving normally. The only place the doctor would send me was to a psychologist."

- ForumKvinneguiden.NO

## Symptoms being seen as a natural, acceptable part of being woman

"I am 32 years old; I know what period pain feels like. I don't want to be told that it's "probably just menstrual cramps" when I call the on-call doctor at 1 a.m. when I'm drenched in sweat, moaning in pain, lying and pressing my head into the wall because I can't stand the pain. It would be really nice if doctors took women's pain seriously, instead of seeing us as hysterical. It turned out I had gallstones and ended up getting hospitalized."

- Reddit.com

## Ignoring or belittling symptoms and complaints

"I went to the GP for an assessment of undiagnosed Asperger's/autism or whether I was just "struggling a bit" mentally, but he thought it was just nonsense. Everything you struggle with when you're a woman is "just" stress etc that gets better if you do yoga and mindfulness and sleep more."

- Reddit.com





“[Women] more often have complex conditions without any clear physical cause and are therefore more prone to not being taken seriously.”

- Professor, Medical Psychology,  
University of Oslo

# Gender biases are likely to play a role in the outcome of HCP consultations

Research suggest that **women are more likely to be aware of their pain and discomfort, and they remember it better than men.**

This can influence current data on e.g. ADRs in women.

Additionally, it can lead to situations in the HCP consultations, where **women's expressions of pain or discomfort are misconstrued as exaggerated.**

[\(NHI.no\)](https://nhi.no)

Behaviours	Women more likely	Equal	Men more likely	Don't know
Appear emotional when they experience a health issue	74%	22%	3%	1%
Come forward with mild symptoms they are experiencing	65%	26%	8%	1%
Appear anxious about their health	50%	41%	9%	0%
Need reassurance about their health	44%	49%	7%	0%
Over-exaggerate the symptoms they are experiencing	43%	46%	5%	7%
Explain their symptoms clearly to me	39%	46%	14%	1%
Only visit a doctor when experiencing more severe symptoms	8%	16%	75%	1%

*Question: Typically, when in consultation on health matters or issues with your patients, are women or men more likely to display the behaviours listed below, or do they behave the same? Base: 250 HCPs in the UK surveyed online 28 September – 24 October 2022*

Figure: UK HCP's surveyed perception of gender differences in how patients present themselves ([Ipsos, 2023](#))

# 4 years

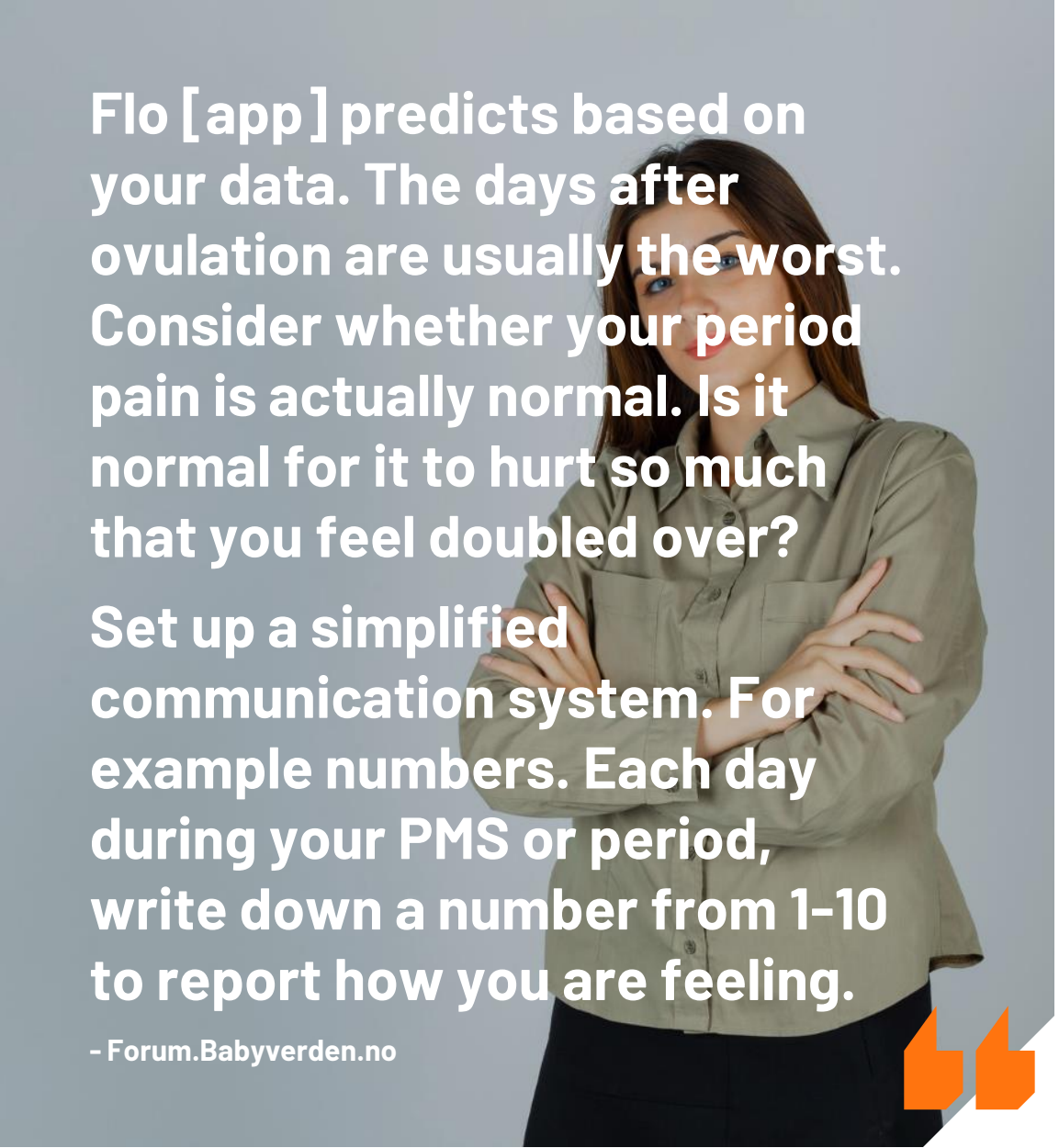
**Is the average delay in  
diagnosis for women  
across 770 types of  
diseases in Denmark**

[Westergaard et al. 2019](#)

# Women online demonstrate a proactive health approach







Flo [app] predicts based on your data. The days after ovulation are usually the worst. Consider whether your period pain is actually normal. Is it normal for it to hurt so much that you feel doubled over?

Set up a simplified communication system. For example numbers. Each day during your PMS or period, write down a number from 1-10 to report how you are feeling.

- Forum.Babyverden.no

## Individual health monitoring is trending in online discussions

In the online discussions, there are signs of increasing health proactivity, arguably influenced by the unclear definition of “normality” and the experienced lack of understanding from HCPs.

Interestingly, we see women online share tips, stories and experiences about **defining their own normal through health monitoring technology**.

**By tracking their own patterns**, women can define what is normal for them, and more easily monitor outliers.

The health proactivity and monitoring is visible across therapeutic areas:

[Zooming in on trends in online discussions related to cancer](#), the three main trending online discussions cover “**self-examination**”, “**getting tested**” to detect early-stage cancer and utilizing “**genetic test kits**” to better understand hereditary risk of cancer.

**Tracking apps** is a further trending topic in discussions related to [gynecological health](#) and [reproductive health](#).



# Women are taking charge of their own health:

## 3 trending online discussions

### Focus and awareness of nutrition as an important recovery factor

"Diet/nutrition and a healthy weight are incredibly important when you are ill in order to withstand the treatment."

### Persistence in HCP consultation and seeking help in multiple places

"At first, they refused to examine me and take blood tests when I had lots of symptoms and was very sick. [...] Lived temporarily in Germany and received help there within a month, underwent surgery and was diagnosed with endometriosis. Was also diagnosed with Ulcerative Colitis in Germany. Something that I am seriously ill with. Doctors in Sweden have straight up told me that I can't feel that way, that I'm not in pain, because I don't cry."

### Independent research on symptoms, diseases and solutions

"Unfortunately, the Norwegian healthcare system does not have such up-to-date knowledge about e.g. PCOS and other hormonal disorders, and mostly only offer birth control pills or Metformin, so here research is your best friend."

# Women online seek solutions to tackle mental health issue beyond the official system



# 1 in 3

**Danish women aged 16-24 report having poor mental health.**

[Psykiatrifonden](#)

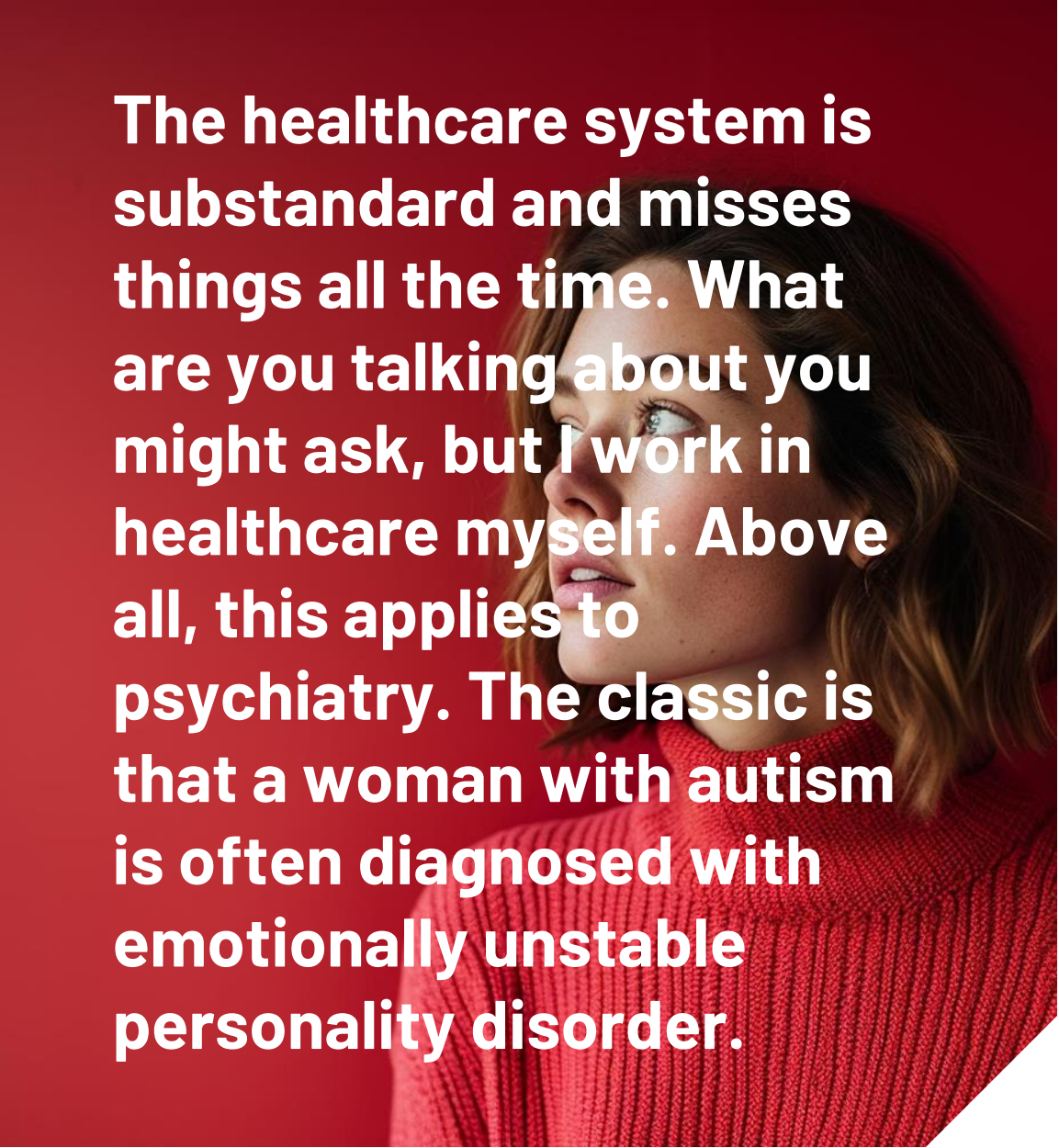
# Women's overrepresentation in mental health statistics is reflected in online dialogue

**Mental health is a prevalent theme in online discussions on women's health covering [8% of online health discussion across markets](#).**

This tendency reflects the societal **overrepresentation of women in mental health statistics** across the Scandinavian countries ([Psykiatrifonden Folkehelseinstituttet](#), [Folkhalsomyndigheten](#)). Mental health issues are more common among younger women.


Common diagnoses with overrepresentation in women are stress, depression, anxiety and [eating disorders](#). Further, there is an increasing number of women getting a diagnosis for ADD, ADHD and autism.

Concerningly, the share of women in contact with health authorities due to mental health issues is [increasing](#). At the same time, the wait time for psychiatric health services becomes [longer](#).




The healthcare system is substandard and misses things all the time. What are you talking about you might ask, but I work in healthcare myself. Above all, this applies to psychiatry. The classic is that a woman with autism is often diagnosed with emotionally unstable personality disorder.





I also carry a lot of my challenges alone and wish it had been discovered when I was a kid so I maybe didn't spend so much energy masking that I constantly get burnout of other people's as well as my own expectations to myself 😊



## Women online pursue solutions beyond the official system

**Women are more prone to suffer mentally than men.** Depression, e.g., hit twice as many women as men, spiking during the child-bearing age and menopause, suggesting that it may be [linked to hormonal changes and stress](#).

Unsurprisingly, **better access to timely and affordable therapy** emerge as a key [unmet need within mental health](#) among women online, who are experiencing the systematic challenges handling the increase in people needing mental health support ([e.g. within ADHD](#) with developing [symptom](#)

[understanding](#)).

However, the increased focus on mental health also seem to result in more **proactivity** among women trying to manage their mental health, pursuing potential solutions outside a system that not fully tackles the current challenges.

[The trends in mental health discussions online](#) as such show how women explore more **holistic approaches**, focus on **preventive methods** and implement **technology** to manage their mental well-being.

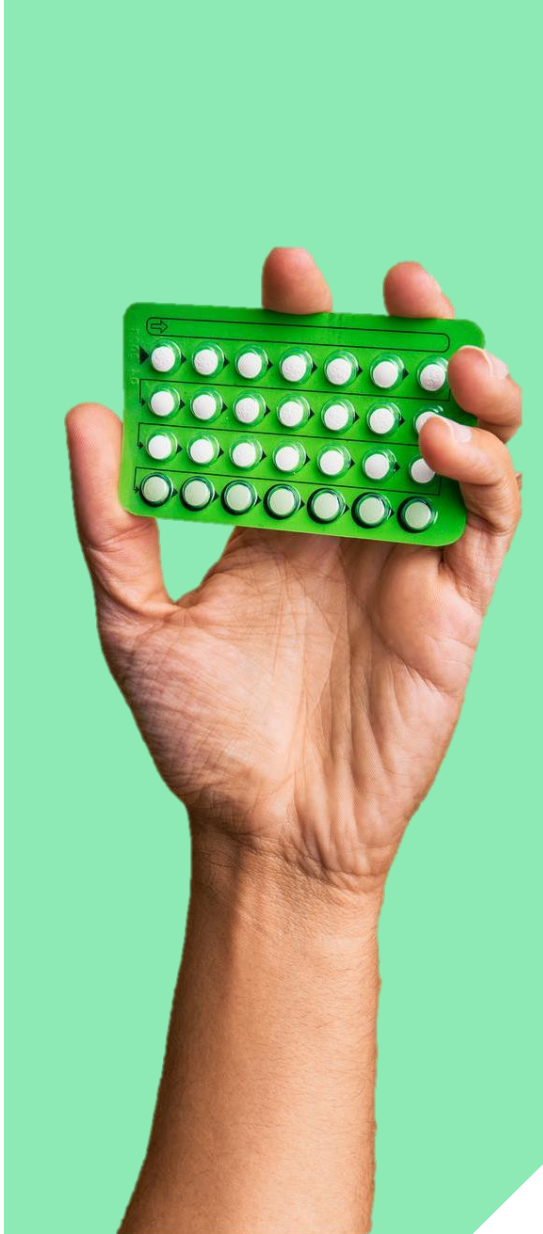


# **KEY ONLINE DISCUSSION: SEXUAL & REPRODUCTIVE HEALTH ACROSS PHASES OF LIFE**



# **Discussions show a desire to move away from hormonal contraception**





# Women are moving away from 'normalized' hormonal contraception

## Embracing non-hormonal contraception for better sexual health

### **Women online are sceptically discussing the widespread use of hormonal contraception**

Discussion online find women discuss how hormonal contraception has been used a "fix-all" treatment prescribed for varied conditions such as acne, period cramps or heavy menstrual bleeding.

### **Increasing focus and awareness of side-effects**

Further, the side effects of hormonal contraception are

central to discussions, which seem to make women more sceptical of what should be accepted.

Particularly mood swings, weight gain and decreased libido are mentioned as barriers to use hormonal contraception.

### **And search for non-hormonal alternatives**

Women online are exploring the use of natural, non-hormonal contraception, such as tracking ovulation, temperature or

cervical mucus to find out when they're ovulating.

Non-hormonal copper IUDs are also commonly discussed, although often with notes on the risk of heavier bleeding and menstrual cramps.

Lastly, it seems that the use of condoms for contraception is increasing in popularity.

This fits well with the overall [sexual health trends](#) covering "hormone free living", "sexual education" and "sexual wellness".



# Women share frustrations with contraception online



I'm glad when men start going to the doctor and just get a **birth control pill as an all-round treatment** 🙌

- X.com



The mini-pill doesn't work either, **it gives me depression, makes me fat and takes away sex drive.** Honestly, hormonal contraception is often frustrating, and I don't dare touch it anymore.



A few years ago, I had a copper IUD inserted and had **the worst abdominal pain I've ever experienced** [...] so I decided to go to the doctor. I am referred to the gynaecology department and come for an examination, where I am told that I am just menstruating and that my body just needs to get used to the IUD [...] In the end, I get an emergency appointment with my own gynaecologist, who takes one look and says, "hang on, I understand you're in pain - the IUD has moved halfway out of the cervix".

- Reddit.com

# Women online are gathering around infertility





# Gathering around infertility online

## **Many women share their stories and experiences struggling with infertility**

Across Scandinavia, we find that many women are sharing their experiences with fertility challenges, and their journey with getting fertility treatment.

They commonly express how they have struggled with the mental load of infertility, as how the burden and responsibility often falls on the individual woman.

## **A lot of uncertainties related to infertility are visible in the online dialogue**

Women online express uncertainty and ask questions such as how long to wait before attempting fertility treatment, and which measures and treatments are available to combat infertility.

Discussion also include how to improve the chances of getting pregnant without using assistive reproductive technologies, such as taking supplements and getting acupuncture.

## **Tracking, monitoring and use of tests may lead to even bigger disappointments**

Fertility tracking technology is a key [trend in reproductive health discussions](#) online.

While this provides hope and empowerment to many women, the discussions often centres around disappointment and grief after negative pregnancy tests or miscarriages, which happen despite all their efforts.



# Women with infertility challenges seek comfort and advice online



Just found out that I miscarried again. Second time in six months. I live healthy, exercise properly, eat well, no overweight. Taking all vitamins recommended etc. Trying to have a baby is taking over my life. Is there anyone in the same position? Anyone with sunshine stories or someone who just also wants to complain a little? **I need company in my grief.**

- Familjeliv.se



Yesterday's test was stronger than today's. Both are blue and the images are of course within the recommended time. But **is there anyone here** who had stronger tests one day and weaker the next in early pregnancy and they have become a full-term pregnancy?

- Flashback.org



**It can be hard to be in treatment, so take care of each other.** It can be hard with all the hormones you have to take which have side effects, especially in relation to your mood. [...] Up until the treatment, I have taken a lot of vitamins and supplements, but I don't know if I would recommend it as I don't know if it made a difference or was a waste of money.



# While fertility tracking helps provide a sense of control, it also adds confusion and a mental load

## Women online discuss the effectiveness of Fertility Awareness Methods (FAMs)

Online forums seem to be an important support system to discuss the effectiveness of fertility awareness methods, share personal experiences, and find education.

FAMs discussed include body temperature measurement (BBT) or urine tests (PDG). Popular tracking apps discussed include Natural Cycles, Clue, Mira, FLO, or Fertility Friend.

## Several barriers and concerns for the use of FAMs are mentioned

Despite the benefits, a feeling of confusion and insecurity is shared among users online, especially when the tools do not always provide consistent results.

The daily discipline required, the cost of the app, and the lack of guarantees on effect are also frequently discussed, as potential concerns for the use of e.g. tracking apps.

## Women feel they carry a mental load in family planning, heightened by the use of apps

Interestingly, we observe hints that the downside side of gaining increased control through fertility technology, is that women may feel a heightened sense of responsibility for both preventing and achieving pregnancy.

# Fertility tracking and FAMs are popular in discussions, but it's not all positive experiences



Any experiences or thoughts about this? Should I have this checked by a doctor/gynaecologist? **I feel like it's all on me.** I do not have so much experience that I am confident about when we should have sex. Is this when ovulation tests show positive and for how long? Following the Flo app now is chaos because it doesn't show anything.



**You should never trust an app.** An app can never know for sure when you are in your fertile window or not. I think you should familiarize yourself a little more with both the app and how the cycle actually works – because there is not that ABC order of everything when it comes to the cycle.



I feel this is a bit vulnerable to post, so it's absolutely golden to have a forum like this. My partner and I have recently decided to try and get pregnant, but **I'm struggling to understand my cycle** as it only has become longer and longer in recent months.



# **Women online express difficulties navigating menopause**





# Online forums helps women navigate the uncertainties of menopause

## **Women share their worries with severe menopausal symptoms**

Menopause experienced shared online include hot flashes, night sweats as well as struggles with mood swings. Additionally, some share that they experience a difference in their cognitive function, to the extent that some women worry that they may be developing dementia and Alzheimer's. These sudden changes lead to a lot of worry and uncertainty.

Some women even express how they can feel their bodies declining, and that it feels like a

betrayal of their own body.

Others also express experiencing "drying from the inside out", which becomes apparent in their sex lives, as their libido decrease significantly, as well as vaginal dryness can make having sex hurt.

## **The first symptoms of menopause cause uncertainty on what is normal**

As the Scandinavian women begin to experience the first symptoms of menopause, many seek online to share these symptoms and the resulting

uncertainties, trying to understand if their symptoms are to be expected and whether it's normal or not.

*I entered menopause a couple of years ago and have had so many cognitive problems. I buzz, forget and have poor concentration. I can't follow what people are saying, ask about things that have just been said. Forgets the content of the conversation the day before. Unable to keep order [...] Have I got Alzheimer's, or is this normal and something others can relate to?*



# Many women seek clarity, but experience some frustration with HCPs

## **Many women seek clarity on their situation through HCPs and hormone level testing**

In particular, the perimenopause seem to cause a lot of confusions and questions, where women are unsure if they are entering menopause, or simply have irregular periods.

Here, the discussions reveal a desire for clarity, with women seeking advice from healthcare professionals and showing an interest in hormone-level testing.

## **Some frustration with HCP consultations related to menopause**

In some cases, women experience that their HCPs don't acknowledge their concerns or don't possess sufficient knowledge about menopause. Some women are e.g. told, that they cannot be going through menopause, if they still bleed, despite having symptoms of menopause. They share these experiences online with others and discuss how to approach HCPs.



# Women online share a lot of uncertainties related to menopause



I am 47 years old and now experience that my period is unstable, i.e. it was 10 days late and I have been spotting so heavily for 7 days then continued spotting. A total of 3 weeks. **Is this normal?**

- ForumKvinneguiden.NO



**I've read a lot, but I still don't understand...** Can someone explain the following to me: 1) When the period has been gone for a year, is that the START of the menopause or does one year's absence mean that one is done with the menopause? 2) And what happens if you start hormone therapy against menopause symptoms and get rid of them?

- Reddit.com



**I am in the middle of menopause. I think. I haven't lost my period, but I have a lot of pain.** Someone I've spoken to says I should consider an IUD. I'm going to see my doctor and have my hormone levels checked soon. But he is such a typical "old school" doctor. He believes that one has not reached menopause until the period is completely gone.

- ForumKvinneguiden.NO



# Managing menopause show both holistic and medical approaches

## **Many women explore and discuss natural remedies to manage the menopause**

The menopausal symptoms may have serious implications in both personal and professional lives. To manage the symptoms, many women online explore and discuss alternative treatments, such as acupuncture and reflexology.

These discussions also include the diet changes and the use of supplements such collagen, omega 3 and D-vitamins.

## **Exercise is discussed as a way to take back control during menopause**

Women online express how they feel that they are taking back control over their bodies through exercise, in a period where there are many things they cannot control.

Tips on personal trainers and tailored workout routines are similarly shared.

## **Hormone-replacement therapy (HRT) a key area of discussion**

Although some women take a holistic approach to menopause, a prevalent approach discussed online is HRT, also highlighting its additional benefits in preventing cardiovascular diseases and osteoporosis.

The discussions also reveal some uncertainty on the treatment, serving as a barrier for initiation.

Some women also share stopping treatment due to severe side-effects. Interestingly, oestrogen sprays or plasters are often suggested as alternatives.

# Women online are exploring holistic solutions to manage their menopausal symptoms



## **But what about acupuncture?**

The two treatments [acupuncture and reflexology] are the only ones that have worked on my hormonal imbalance.



## **I don't want to use hormones.**

My body simply reacts to hormones. Supplementation of vitamin D is good. Using melatonin for sleep. Daylight. Sun. Exercise. Don't stress. **Do you have any tips for other good remedies?** Herbs? Natural remedies? Other?



**I have been using hormone therapy for about 7 months now and can't manage without it.** I'm really stressed that I won't be able to get hold of more of this when I run out in two months.



# APPENDIX: METHODOLOGY



# Methodology

## Introducing Social Intelligence Analysis

### Why social intelligence analysis?

The “typical” social media user is estimated to spend 2 hours and 23 minutes per day using social media platforms.

Consequently, social media data is a vast pool of information that can give us immediate insights on what people think about your topic of choice. With social intelligence analysis, we dip into this pool of information and extract insightful findings from the dialogue within the topic.

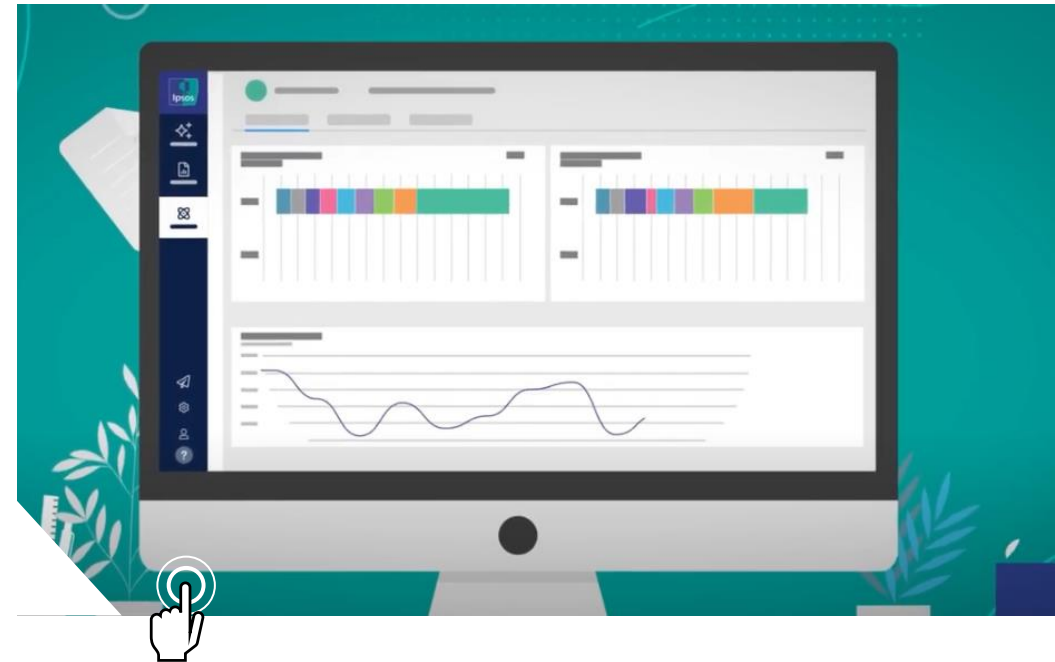
### Ipsos Synthesio is our gateway to the online dialogue

At Ipsos, we have our own software to access and analyse social intelligence data: Synthesio.

For each project we do, we create a customized Synthesio dashboard where we retrieve, organize and analyse the data. We keep the dashboards for up to one year.

This means, that we can revisit the data and analysis at a later stage, if we want to dig even deeper or look at the data in a new way!

## Ipsos Synthesio



Click to watch the  
Ipsos Synthesio  
introduction video



# Methodology

## Capabilities & Limitations of Social Intelligence

### Capabilities

- Capture "in-the-moment" user experiences, attitudes and language
- Target niche research topics
- Get instant access to large amounts of qualitative data from all over the world
- Provide bottom-up analysis in-depth insights into the experience of consumers, without prompting them
- Inspire for further research and direct research design

### Limitations

- Social media data is *not* representative of a given population
- We cannot access personal information about the online users, and therefore have no way to determine background variables such as gender, income, occupation or age.
- We cannot ask follow-up questions or generate data – if the data isn't there, it simply isn't there.





# What makes women share about their health online?

## Uncertainty

Health-related questions often spur anxiety or confusion, especially if women do not have immediate access to a healthcare expert. They will look for answers online, to alleviate their worries or find reassurance.

## Availability

Unlike healthcare, the internet is always available and social networks are open 24-7. Women are looking for quick answers to their questions. With the help of forums, networks and blogs, they can reach out to others who share their concerns at any time.

## Validation

Finding others who share or understand our concerns creates a feeling that we are not alone. This is especially important when women feel that their concerns were not heard or understood by others. It helps them feel heard and fulfils an emotional need.

## Sharing

Many women choose to share their experiences online for the benefit of others who may be struggling with the same challenges. Often, healthcare professionals have not experienced the same situation as the patient, unlike other patients who have the same health challenges.

# THANK YOU

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