ABHI

CAPTURING GENDER EQUALITY IN HEALTHTECH

2025 Report



ABOUT AHBI

ABHI is the UK's leading industry association for health technology (HealthTech).

ABHI supports the HealthTech community to save and enhance lives. Members, including both multinationals and small and medium sized enterprises (SMEs), supply products from syringes and wound dressings to surgical robots, diagnostics and digitally enhanced technologies. We represent the industry to stakeholders, such as the government, NHS and regulators. HealthTech plays a key role in supporting delivery of healthcare and is a significant contributor to the UK's economic growth. HealthTech is the largest employer in the broader Life Sciences sector, employing 154,000 people in 4,465 companies, with a combined turnover of £34.3bn. The industry has enjoyed growth of around 5% in recent years. ABHI's 400 members account for approximately 80% of the sector by value.

ABHI's Commitment

Our approach to Equity, Diversity, and Inclusion is a key part of ABHI's culture. We are committed to ensuring that every voice, regardless of background or identity, is actively sought out, heard and respected.

We will strive, constantly, to create an industry where everybody feels able to bring their whole self to work.

We will promote understanding and awareness of how important it is to embrace inclusivity of all in our industry and the patients we serve. Including fully diverse perspectives drives creativity, innovation and our ability to transform healthcare.

We will steadfastly challenge behaviours, wherever they occur, that detract from the integrity of our sector.

WHY IS GENDER EQUALITY IMPORTANT?



Drives Economic Growth and Innovation

Gender equality in the workforce is a powerful engine for economic productivity. McKinsey estimates that narrowing the gender gap could add \$12 trillion to global GDP by 2025. In the UK, the HealthTech sector's potential to scale and innovate is significantly enhanced when inclusive leadership and diverse perspectives are embedded at all levels.



Reduces Poverty and Broadens Opportunity

Equal access to education, work, and financial resources empowers women to lift themselves and their families out of poverty. The World Bank highlights that improving gender equity accelerates economic development and leads to more resilient and inclusive societies.



Improves Health Outcomes for All

Health equity is intrinsically linked to gender equity. UNICEF finds that when women have greater autonomy and decision-making power, child health and survival rates improve. For the HealthTech sector, addressing gender disparities in both the workforce and product design ensures more effective, inclusive health solutions.



Enhances Access to Education and Skills

Removing gender-based barriers to education helps all individuals realise their potential. UNESCO reports that each additional year of schooling for girls can boost future earnings by 10%–20% and reduce child mortality. This is especially relevant for future-proofing the HealthTech workforce with diverse skills and perspectives.



Strengthens Families, Workplaces, and Communities

When men and women share equal rights and responsibilities, families are stronger, workplaces are more productive, and communities thrive. Flexible working, parental leave equity, and inclusive leadership support healthier work-life balance and retention across the sector.



Protects Human Rights and Promotes Fairness

Gender equality is not only beneficial - it is a basic human right.
Upholding fairness and equal opportunity in the workplace reflects positively on organisational culture, enhances employee engagement, and is increasingly scrutinised by investors, customers, and regulators.



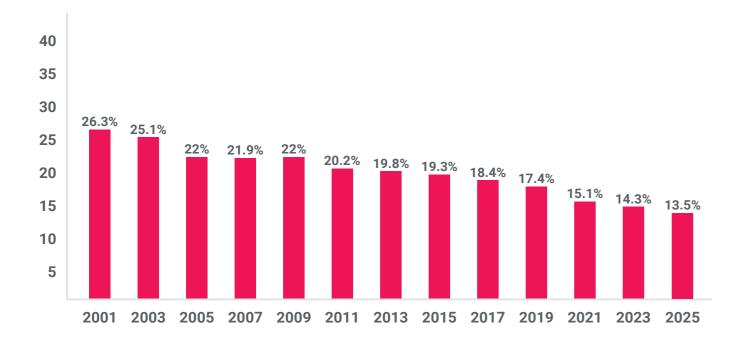
Builds Better HealthTech

A diverse HealthTech workforce is better equipped to create technologies that serve all populations. Gender-diverse teams are more likely to consider inclusive design, clinical trial equity, and equitable access, ensuring that innovations work for everyone - not just a subset of the population.

HOW DOES THE UK RANK?

PwC's Women in Work Index, which assesses progress made towards achieving gender equality at work across 33 OECD countries, ranks the UK at number 18.

The UK has a gender pay gap of 14.3%. This is declining slowly, falling by approximately a quarter over the last decade, but **more work needs to be done.**



This means that for women in the UK, they will, on average, earn 86.5 pence for every pound earned by men.



INTRODUCTION

Welcome to the third annual Gender Equality in HealthTech Report.

As HealthTech drives advances in patient care and innovation, ensuring gender equality within our workforce is essential to building a stronger, more representative industry. In 2025, 110 professionals from across the industry contributed to our annual survey - offering valuable reflections on workplace culture, leadership, and equity. We are grateful to all who took part and helped advance this essential conversation.

This year's insights reflect both persistent challenges and shifting priorities. Leadership success continues to be underpinned by strong organisational values and work-life balance, with the importance of company culture rising to 66% - the highest we have seen to date. Meanwhile, representation remains a key driver of progress, with women highlighting the positive impact of seeing role models at senior levels.

The data also shines a light on continued disparities. Two-thirds of women in leadership roles report being treated differently, and resistance when leading male colleagues is now significantly more likely to be attributed to gender. At the same time, imposter syndrome remains widespread, especially among women, underscoring the need for more supportive and inclusive workplace cultures.

HealthTech has a powerful role to play in modelling inclusive leadership. As a sector at the intersection of innovation and care, we must reflect the communities we serve. This includes addressing systemic barriers - like the gender pay gap and unequal caregiving expectations - and building environments where diverse perspectives are not only welcomed, but expected.

Through this report, we explore how gender continues to shape experiences in the HealthTech workforce - from leadership styles and development pathways to culture, resistance and impact. As we move forward, these insights serve not only as a benchmark but as a call to action: to challenge bias, champion inclusion, and ensure equity is woven into the fabric of every organisation.

Jane Lewis, Chief Operating Officer and Chief Financial Officer, ABHI

LEADERSHIP TECHNIQUES AND BARRIERS

Leadership in HealthTech is increasingly defined by collaboration, autonomy, and leading by example.

- 49% of professionals say they encourage team collaboration to reach consensus up from 45% last year.
- 43% lead by example to inspire and motivate their teams, a slight dip from 45%.
- Notably, 42% now say they give their teams the freedom to work independently a significant rise from 34% last year.

When it comes to leadership style by gender, women are more likely to describe themselves as leading by example (51% of women vs 25% of men). In contrast, last year's gap around team autonomy has levelled out - with 42% of both men and women now encouraging independent decision-making.

What drives leadership success?

This year, two factors emerged as the most critical to succeeding in leadership:

- Organisational culture and values (66%, up from 57%)
- Work-life balance and flexibility (61%, up from 57%)

These findings reflect a growing emphasis on values-led, human-centred leadership. Other important factors include:

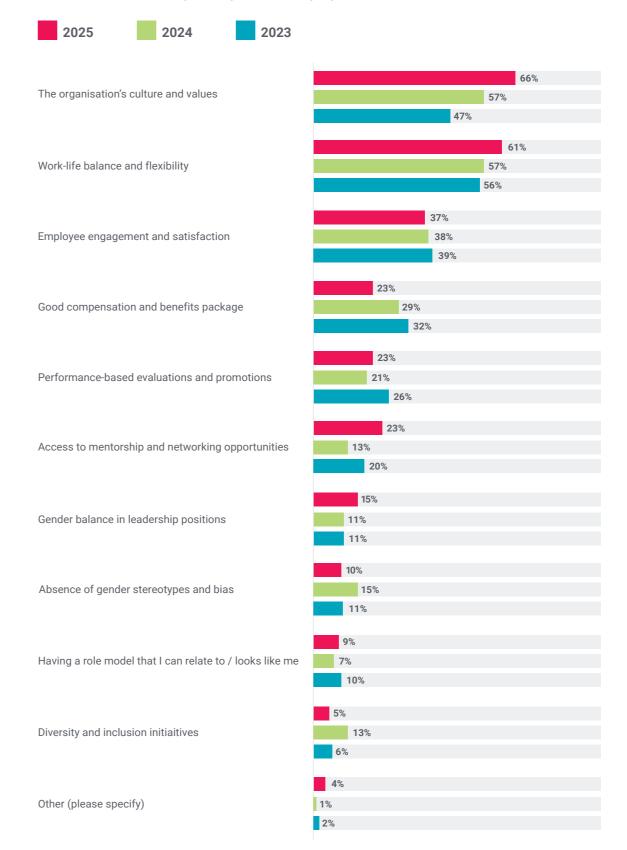
- Employee engagement and satisfaction (37%)
- Compensation and benefits (23%)
- · Performance-based evaluations (23%)

Representation and inclusion are also valued, with:

- 15% citing gender balance in leadership as important
- 10% highlighting the need to eliminate gender stereotypes
- 5% noting the role of diversity and inclusion initiatives

Interestingly, nearly a quarter (23%) of women say gender balance in leadership has directly supported their career progression - compared to 0% of men, highlighting the importance of visible role models and inclusive environments.

% for whom the following are important in helping succeed as a leader



WOMEN IN LEADERSHIP

Women in leadership bring a wealth of value - not just to their organisations, but to the broader culture of the HealthTech sector.

Why does it matter?

This year's top-cited benefit of women in leadership was the increased visibility of role models and representation in the workplace - highlighted by 65% of respondents, up from 43% last year. This was closely followed by the recognition of diverse leadership styles (60%) and emotional intelligence (33%) - qualities that contribute to more inclusive, empathetic, and effective leadership environments.

What barriers remain?

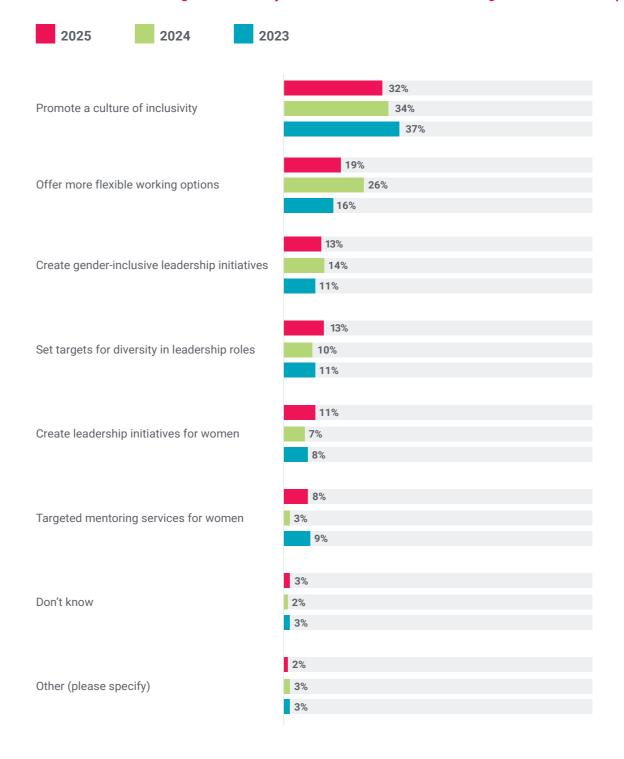
Despite this recognition, women still face disproportionate challenges on the path to leadership. The most commonly identified barriers include:

 Gender bias and stereotypes — cited by 45% of respondents, up from 37% last year

- Balancing work and personal life 42%, down slightly from 44%
- Family and caregiving responsibilities 35%, a notable drop from 47%
- Lack of diverse representation on leadership teams 37%, up from 26%
- Gender pay gap cited by 38% of women as a barrier, but 0% of men

These figures underscore the importance of addressing not just external barriers, but internal culture. Women are significantly more likely to perceive structural inequities, and junior managers, particularly women, are more attuned to the presence of gender bias, with 53% identifying it as a key barrier (vs. 43% of middle managers).

% who think the following is the best way to raise awareness of issues facing women in leadership.



RAISING AWARENESS AND TRACKING PROGRESS

A third of respondents (32%) believe that promoting a culture of inclusivity remains the most effective way to raise awareness of the issues facing women in leadership - a figure largely unchanged from last year's 34%. However, support for other strategies has shifted. Fewer respondents this year pointed to flexible working options as a key lever for change, with support dropping from 26% to 19%. Despite this decline, women linking gender diversity to business metrics such as financial continue to view flexibility as a more important driver than men (23% versus 11%).

There was a slight increase in support for setting measurable diversity targets, rising to 13% from 10% the previous year. Women were again more likely to favour this approach, with 16% backing diversity targets compared to just 6% of men. Interest in leadership initiatives for both men and women dipped slightly, from 14% to 13%, suggesting a broader shift towards structural and cultural interventions rather than programmatic ones. Notably, age played a role in preferences: respondents aged 45 and over were more inclined to support targeted leadership initiatives for women (17%) than their younger peers aged 18-44 (5%).

When it comes to understanding the positive impact of women in the workplace, respondents cited employee engagement as a key indicator. But many also emphasised the simple importance of capturing and using data - whether to highlight achievements, inspire others, or track organisational performance. For some, the value lay in showcasing role models; for others, it was about performance.

Work-life balance continues to be the most significant barrier in women's careers. Though its prominence as a barrier remains unchanged, it directly links to the lower support for flexible working as a solution - a contradiction that suggests cultural barriers may persist even where policies exist. The findings also reflect ongoing gendered expectations around caregiving and home life, which many respondents cited as a reason why women's careers are more likely to be derailed. In particular, several comments pointed to the lack of support at home, the challenges of starting a family, and traditional assumptions about who should bear caring responsibilities. Whilst some still referenced issues like "boys' club" culture or workplace bullying, these were less commonly reported than the personal and societal expectations placed on women outside the workplace





WHO INSPIRED YOU?

My father, he held leadership positions and inspired me to want to do so.

I am very responsible and seek out leadership positions.

Albert Einstein once said, 'I speak to everyone in the same way, whether he is the garbage man or the president of the university'.

A previous male boss believing in my ability and skills.

role model

My own interest in self development

and growth.

Focusing on the outcome of what our product achieves. Ensuring the product is delivering on patient safety and achieving what it is designed to do.

I have always been ambitious and highly driven, however a previous female manager was highly inspiring, seeing how she navigated a strong male leadership team, and being someone you could speak openly and candidly to.

In a round about way my parents, I didn't want to be the stay-at-home mother.

Previous leaders as role models.

REPRESENTATION, STYLE AND THE BARRIERS THAT REMAIN

The presence of women in leadership continues to bring distinct and widely recognised benefits to the HealthTech sector. This year, the most cited advantage was the increased visibility of role models for other women in the workplace, with 65% of respondents highlighting this as a key benefit - a notable rise from 43% in the previous year. Closely following this was the value of diverse leadership styles, acknowledged by 60% of respondents. This figure remains consistent with last year's findings and underscores a sustained appreciation for the breadth of perspective that women leaders bring. Additionally, nearly a third of respondents (33%) pointed to emotional intelligence as a defining strength of women in leadership - again, a steady result that mirrors the previous year.

Despite this recognition, women still face pronounced barriers to progressing into leadership roles. Gender bias and stereotypes emerged as the most significant challenge in 2025, cited by 45% of respondents - up from 37% last year.

While balancing work and personal life remains a major hurdle, its prominence has slightly decreased to 42%, and family and caregiving responsibilities also saw a decline, dropping from 47% to 35%. However, concerns about the lack of diverse representation at leadership level have grown, now cited by 37% of respondents compared to just 26% the year before.

The gender pay gap remains a stark dividing line in perception. Whilst 38% of women view it as a barrier to progression, none of the men surveyed identified it as such - a disconnect that highlights how systemic issues can remain invisible to those not directly affected. Perceptions also vary by seniority: junior managers are more likely to recognise gender bias and stereotypes as obstacles (53%), compared to 43% of middle managers. These disparities suggest that the further individuals progress in their careers, the less visible some of these challenges may become - even as they continue to affect others within the same organisation.

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AWARENESS AND ACCOUNTABILITY

Promoting a culture of inclusivity remains the most popular approach to raising awareness of the challenges facing women in leadership, with 32% of respondents selecting this option - broadly consistent with last year's 34%. However, support for other interventions has shifted. Fewer respondents now favour flexible working as a means of raising awareness, with backing falling from 26% to 19%. Despite the overall decline, women continue to view flexible working as more impactful than men do (23% versus 11%).

Support for measurable diversity targets has risen slightly to 13% (up from 10%), and respondents aged 45 and over are more likely than younger participants to support targeted leadership initiatives for women (17% compared to just 5% of those aged 18–44). Meanwhile, interest in leadership programmes open to both men and women dropped marginally, from 14% to 13%.

When it comes to evaluating the positive impact of women in the workplace, respondents highlighted a range of approaches. Many pointed to employee engagement as a clear indicator of progress, while others focused on the importance of simply having the data - whether to monitor performance, track representation, or profile achievements that inspire others across the organisation.

Despite signs of progress, balancing work and personal life remains the most significant barrier to career advancement for women in HealthTech. This finding is consistent with previous years and continues to underscore the gendered impact of caregiving responsibilities. Several respondents emphasised the personal toll of decisions around starting a family, with some citing a lack of support at home or entrenched assumptions about who should take on caring duties. Whilst a few referenced outdated attitudes, the most common derailers of women's careers were clearly rooted in the unequal distribution of responsibilities outside the workplace.



DIFFERENTIAL TREATMENT AND GENDER-BASED RESISTANCE

This year's findings reveal a persistent and growing perception of differential treatment among women in HealthTech leadership. Nearly two-thirds (64%) of women reported being treated differently in a leadership role - a notable increase from 50% last year. Of those, 31% attributed the treatment directly to their gender, rising to 42% among women aged 45 and over, and 39% among those working in other health-related sectors. A further 27% were unsure whether gender played a role, while the remainder did not believe it was a factor.

Perceptions also vary by seniority. Middle managers were more likely to say they had been treated differently due to their gender (38%) compared to 28% of junior managers - suggesting that exposure to bias may intensify with career progression.

Resistance to women in leadership roles remains a common experience, particularly when managing male colleagues. In 2025, 62% of women in leadership roles reported encountering some form of resistance when leading men, consistent with last year's results. However, more women now believe that this resistance is explicitly gender-based, with 31% identifying gender as the cause - more than double the figure from last

year (15%). The proportion unsure whether gender was a factor also rose (26% vs 15%), while the share who said resistance was unrelated to gender has halved, from 14% to just 5%.

This type of resistance appears more acute outside of HealthTech, with 48% of women in other health-related sectors reporting gender-related resistance. Again, middle managers were more likely than junior managers to experience this form of bias (35% vs 31%).

Some women also noted difficulties when leading other women, attributing challenges to age dynamics or competition between peers. One respondent observed that "women compete with women – especially older women," while another reflected that their most negative experiences had occurred outside the UK, stating: "My negative experiences due to gender have not happened when working in a UK role that I am aware of."

These insights suggest that while overt bias may be less visible within the UK HealthTech context, structural and cultural challenges persist - particularly as women advance into more senior roles or work in adjacent sectors.

LEADERSHIP EXPECTATIONS AND BENEFITS

This year saw a significant increase in the number of professionals who anticipated reaching a leadership role at the outset of their careers. Sixty percent of respondents said they expected to progress into leadership - up from 48% last year - with 9% responding "definitely" and a further 51% saying "probably." In contrast, 37% said they hadn't expected to attain a leadership position, down from 46%.

When asked what motivated their career progression, respondents cited ambition, determination, and a desire to make a difference. For some, it was about aligning with their company's purpose and culture. Others highlighted financial reward, job satisfaction, and a passion for their subject matter. As one respondent put it: "The financial rewards that came with the job level were a key motivator."

Respondents also reflected on how their approach to navigating the workplace had evolved over time. Several said they would now place greater emphasis on networking, understanding internal dynamics, and building relationships with mentors or sponsors across the organisation - strategies they felt they had not prioritised early in their careers.

When asked about the benefits they gained from being in a leadership role, the most frequently cited was a greater understanding of other people's perspectives (57%, up from 54%). This was followed by the ability to motivate others (49%), and problem-solving and decision-making skills (both 37%). Fewer respondents reported improvements in communication (26%) and self-confidence (20%), with both figures falling compared to last year (40% and 36%, respectively).

Interestingly, women were significantly more likely than men to cite improved communication (37% vs 13%) and increased self-confidence (26% vs 13%) as key outcomes. Younger respondents (aged 18–44) were especially likely to report increased confidence (33%) and enhanced decision-making ability (50%).

However, there are signs that the perceived importance of diversity, equity and inclusion (DEI) may be diminishing. The average rating for how organisations prioritise DEI dropped from 8.1 to 7.3 this year. Only 16% of respondents rated DEI a "10 - high priority," while nearly one in five (19%) gave their organisation a score of 5 or below - suggesting that DEI may be slipping down the corporate agenda.





IMPOSTER SYNDROME: A PERSISTENT CHALLENGE

Imposter syndrome remains a significant and persistent issue in the HealthTech sector. Eighty-seven percent of respondents said they had experienced it - the same proportion as last year - but the pattern of experience has shifted. Fewer now report feeling it "frequently" (34%, down from 36%), but there was also a decline in those who say it occurs "rarely" (14%, down from 18%). Most experience it at least occasionally.

The gender gap is pronounced. Forty-one percent of women said they experience imposter syndrome frequently, compared to just 19% of men.

When asked how they manage imposter syndrome, respondents shared a range of approaches.

Some focused on breaking tasks down and tackling them one step at a time: "Don't look at the whole picture - take it one step at a time." Others leaned on peer support, noting the value of sharing experiences with other women in their organisation. Some took action to protect their confidence by removing themselves from biased conversations or environments where their contributions were being undermined.

These responses reflect a common theme: that while imposter syndrome is highly individual, it thrives in unsupportive environments - and can be mitigated through culture, community, and inclusive leadership.

This year's findings reaffirm the progress being made across the HealthTech sector, but also highlight persistent challenges that continue to shape women's experiences at work.

From the value of inclusive leadership to the enduring impact of imposter syndrome and gender bias, it is clear that achieving true equality requires both cultural and structural change.

As we look ahead, continued transparency, leadership commitment, and targeted action will be essential to creating a sector where everyone can thrive regardless of gender.

We would love to know what you think of this report.

Do the findings resonate with your own experiences? Has this prompted you to think about your own career, or how you may be able to help support those around you? When we issue this survey next year, are there any additional questions you would like to see asked? If so, please send to enquiries@abhi.org.uk with the heading 'Gender Equality in HealthTech'



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