

SUPPORTING WOMEN GPs TO THRIVE:

FIVE ACTIONS FOR INTEGRATED CARE BOARDS

Culture change is challenging. Often we know what we want to move away from but not always what to move towards. Derived from an NIHR funded research project: *'Investigating the conditions in which women GPs thrive in General Practice: What works, for whom, how and in what circumstances?'*, led by [Dr Ruth Abrams](#), this infographic presents five key actions that Integrated Care Boards can operationalise, to better support women GPs to thrive at work.

Find out more [here](#).



Action 1

Normalise flexibility as a strength

- Build a culture where caring responsibilities are openly acknowledged;
- Encourage teams to see flexibility as professional respect, not reduced ambition;
- Promote everyday habits (e.g. carer-friendly meeting times) that signal psychological safety.

Action 2

Create a fairness-first mindset around workload

- Shift team conversations from 'who's available' to 'what's equitable';
- Encourage awareness of hidden emotional labour and challenge assumptions about who is 'best suited' for complex cases;
- Make fairness visible: share workload audits and celebrate balanced team effort.

Action 3

Strengthen belonging through visible support

- Embed regular peer-support and supervision as part of team identity;
- Champion mentorship and leadership pathways to show women GPs belong in all levels of practice;
- Spotlight diverse role models to challenge outdated expectations about who progresses and why.

Action 4

Implement and evaluate policies

- Implement system-wide policies that provide consistent, fair flexibility standards;
- Evaluate which interventions improve equity and progression for women GPs;
- Communicate policy implementation and review to signal strong organisational commitment to women GPs' wellbeing and career progression.

Action 5

Collect organisational data

- Collect data to evaluate policy impact and identify system-wide patterns affecting equity and safety;
- Apply data insights across domains and drive evidence-based improvements for women GPs;
- Utilise data to support informed, equity-focused culture-change decisions.

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