World Bladder Cancer Patient COALITION

The cost of being unseen:

An opinion piece on what bladder cancer reveals about gender bias in care



Fatima Baig
bladder cancer patient advocate,
INDIA



Helen Lacy
bladder cancer patient advocate,
AUSTRALIA



Prof Ananya Choudhury
Clinical Oncologist,
The Christie and University of Manchester,
UNITED KINGDOM

WBCPC Opinion Pieces 2026

The cost of being unseen:

An opinion piece on what bladder cancer reveals about gender bias in care

Bladder cancer is often seen as a "man's disease" but when women are affected, the consequences can be more severe and the reasons why say a lot about gender bias in healthcare.

On International Women's Day, this opinion piece brings together three perspectives united by a shared goal: to make women with bladder cancer visible. Two bladder cancer patient advocates **Fatima Baig** from India and **Helen Lacy** from Australia share their lived experiences and advocacy insight. Adding a clinical and systems lens is **Prof. Ananya Choudhury**, Member of WBCPC Scientific Advisory Board, Chair and Honorary Consultant in Clinical Oncology at The Christie NHS Foundation Trust and Professor at the University of Manchester in the UK, as well as representative of the European Society for Radiotherapy and Oncology (ESTRO).Together, they call for urgent action to close the gender gap in bladder cancer care because women should no longer be unseen.

"I just thought it was something normal"

Many women with bladder cancer are diagnosed much too late. According to the Women Unseen report, which draws on the **WBCPC Patient & Carer Experience Survey**, 69 % of women said they were initially diagnosed with another condition before their cancer was identified.

In many cases, symptoms like visible blood in urine, the most common sign of bladder cancer, were misinterpreted as urinary tract infections, menopause-related changes or other routine issues.

69%

of women said they were initially diagnosed with another condition before their cancer was identified



31 % of women reported feeling that their symptoms were not taken seriously by healthcare providers.

Almost two-thirds of women surveyed (64 %) did not know this symptom was linked to bladder cancer at all.

This delay in diagnosis can have devastating consequences. Fatima sees this regularly in her advocacy work. ***"Women are hesitant to talk about bladder or sexual health. Even with a doctor, many feel too shy or assume it's not serious,"*** she explains. In some communities, even naming symptoms out loud is difficult. Shame and stigma continue to silence women.

Helen adds that even in higher-income settings like Australia, awareness remains low. ***"Bladder cancer is not part of regular conversations about women's health. If a woman doesn't know what signs to look for, she may ignore early symptoms or not realise she should seek care."***

At the same time, Fatima notes that many women are so focused on caring for others; families, children and elderly relatives, that they put their own health last. The result is often late-stage diagnosis, avoidable suffering and a missed opportunity to intervene earlier.

Even when women do seek help, their symptoms are often dismissed. According to the **WBCPC Patient & Carer Experience Survey**, 31 % of women reported feeling that their symptoms were not taken seriously by healthcare providers.

"My symptoms were not taken seriously"

For Prof. Choudhury, this is a reflection of systemic bias. *"The data show that many women are initially misdiagnosed, told it is an infection or something minor. By the time they get a correct diagnosis, the cancer has progressed,"* she explains. *"This is not about individual doctors but about a broader system that is not trained or designed to recognise bladder cancer in women."*

She adds that services for bladder cancer are often developed around male patients, especially because prostate cancer dominates many urology clinics. *"That can make women feel invisible. They are not the 'typical' patient the system is geared toward."* While the UK's 2025 NICE Bladder Cancer Guidelines highlighted the need for more inclusive care, implementation is lagging.

Helen agrees that assumptions about who gets bladder cancer contribute to delays. *"There's a perception it is a man's disease and that shapes everything from research to how doctors respond when a woman shows symptoms."* She also points out that women sometimes second-guess themselves, worried about being seen as dramatic or wasting the doctor's time. This internalised doubt can add to the delay.

Turning awareness into action

All three agree that public awareness campaigns must speak directly to women. *"We need to normalise talking about bladder health," says Fatima. "Too many women still feel embarrassed or unsure about what is normal and what is not."*

Any woman with unexplained visible blood in her urine should be investigated promptly, just as we would do with post-menopausal bleeding in other cancers.



Helen notes that the success of such campaigns depends on making the messaging feel relevant. *"Health messaging needs to reflect women's realities across cultures, age groups and communities. It needs to make space for women to ask questions and be heard."*

But public education is only one part of the solution. Prof. Choudhury emphasises that health systems must be restructured to better serve women. *"Any woman with unexplained visible blood in her urine should be investigated promptly, just as we would do with post-menopausal bleeding in other cancers."*



"Too many women still feel embarrassed or unsure about what is normal and what is not."

One way to facilitate these conversations is through visual tools. The World Bladder Cancer Patient Coalition created the Unsure Icon, a universal image designed to be interpreted in different ways, to highlight the ambiguity of bladder cancer symptoms and spark dialogue among patients, carers and healthcare professionals.

Advocates use the icon during Bladder Cancer Awareness Month (BCAM) each May to remind the public that early diagnosis is vital and to encourage people to recognise symptoms and seek help quickly.



Building survivor networks and mental health services can help close this gap.

This means developing gender-sensitive care pathways, including specialist nurses, psychosocial support and better training for all frontline professionals. It also means recognising the emotional toll. Women with bladder cancer often experience isolation, fear and shame. Building survivor networks and mental health services can help close this gap.

A call to action for International Women's Day

On the occasion of International Women's Day, we are calling for a shift in how we see and treat bladder cancer in women. For too long, it has been treated as a side note in both public awareness and healthcare systems and women are paying the price.

"We must raise awareness so women know what to look out for."





That needs to change. We must raise awareness so women know what to look out for and feel confident speaking up. We need care pathways that are designed with women in mind, not adapted after the fact, and healthcare professionals who are equipped to listen and act early.

This is not just about adding women into a system built for men. It is about reshaping that system so no one feels invisible. So delays are not expected. So care feels personal, respectful and equal.

Bladder cancer is a women's health issue. This International Women's Day we share Women Unseen report and saylet's start treating it like one and make sure women with bladder cancer are seen.

Our story

The World Bladder Cancer Patient Coalition was established in January 2019 by patient advocates from three national bladder cancer organisations who saw the need for a global bladder cancer coalition. Today, our Coalition unites 17 member organisations across 14 countries, sharing one vision: the best possible outcomes for people affected by bladder cancer, wherever they live. For the first time, people affected by bladder cancer have a force connecting patients, groups and organisations worldwide.

Our network

The World Bladder Cancer Patient Coalition is a global community of bladder cancer patient organisations dedicated to improving the lives of people affected by bladder cancer. Our strength comes from our members, affiliates and partners. Together, we run joint initiatives, collaborate on advocacy and awareness-raising, and share tools, information and resources. If you would like to become a member or start a bladder cancer patient group in your country, visit our website to learn more and get in touch with us directly.

Our Scientific Advisory Board (SAB) is an independent advisory body of world-leading professionals in urology, oncology, radiotherapy, pathology, nursing and research. They guide our work on scientific and clinical matters, ensuring that all our resources and patient information are accurate and trustworthy.

You can find us here:

X: @WorldBladderCan
Instagram: @WorldBladderCan
Facebook: @WorldBladderCan
LinkedIn: @WorldBladderCan
Website: worldbladdercancer.org
Email: info@worldbladdercancer.org

YouTube: Search World Bladder Cancer Patient Coalition

World Bladder Cancer Patient Coalition
Square de Meeûs 38-40
1000 Brussels
Belgium
Reg. Number: 0720.618.047

Secretariat
info@worldbladdercancer.org

The World Bladder Cancer Patient Forum 2026 is made possible with the support of our Global Impact Partners, Johnson & Johnson and ImmunityBio, Premier Partners Astellas, AstraZeneca and Ferring, and our Sponsors Roche and MSD. The content of the event remains the sole responsibility of the World Bladder Cancer Patient Coalition.