

HR INSIGHTS

Menopause & Workplace Adjustments

Researched and compiled by:



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Down to Earth

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Niki Haggerty-James is the Business Development Manager for Health & Her. Niki's focus is on raising awareness of menopause in the workplace, where she gives employers the tools to support employees going through the life-affecting symptoms of perimenopause and menopause.



Health & Her are the leading perimenopause and menopause experts. They offer a wealth of products and services to give next-generation natural and medical support for people's unique menopause journey.

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Health & Her have a business focused service called The Menopause Workplace Support Plan that offers a free survey to identify your business needs, help with menopause policy development, employee training, menopause specialist GP consultations, daily digital coaching through their free app and access to a range of menopause products.

Let's talk about the menopause

- ▶ Perimenopause can start up to 10 years prior to periods stopping

This can be a confusing time. It's a time where people notice things are changing with their bodies, but they're not sure what's going on. Often they're still experiencing periods, so they don't align how they're feeling to being part of the menopause.

- ▶ Menopause is 1 year after your periods have stopped if more than 50, and 2 years if less than 50
- ▶ All women will go through the menopause, but will all experience a different number, range and severity of symptoms
- ▶ Menopause is caused by a natural change in oestrogen and progesterone levels caused by the ovaries shutting down
- ▶ Treatments (such as hormone replacement therapy) aim to manage the symptoms experienced but do not stop or slow down the rate of the natural menopause process.

When we realize the menopause transition can last between 4 to 12 years, you can see why this is an organizational issue and not just an individual's problem.

Menopause will affect people differently. It's very important to recognise this in equality, diversity and inclusion policies:

- ▶ There can be **racial** and **ethnic disparities** as experiences can be influenced by where we live, racism, experienced culture, beliefs and diet. In some cultures and communities, menopause isn't acknowledged. It can be taboo to discuss menstrual or menopausal health.
- ▶ **Sexual orientation** has impacts. i.e. cohabitees could be dealing with their own symptoms, including difficulties at work, whilst also trying to support their partner.
- ▶ **Gender identity:** For trans and non-binary people, the experience of menopause can contribute to gender dysphoria. Consider the expressions we use, avoid phrases like women's issue or feminine hygiene. Instead, say menopausal health or sanitary products.

There is a lot to consider, which is why it can be a challenge for many businesses.

Menopause impacts 51% of the population directly. Indirectly, it affects the other 49% including partners, children, colleagues, and loved ones.

The Symptoms

There are over 30 symptoms experienced during the menopause, some hardly noticeable, while others cause a great deal of distress or discomfort.

A survey conducted by [Health & Her](#), (sampled across several industries: emergency services, a government agency and manufacturing company), found that the top symptoms impacting productivity at work included:

1. Brain fog
2. Stress and anxiety
3. Low energy
4. Poor concentration
5. Trouble sleeping

1 in 10 women had no idea they were going through the menopause

BUPA survey

For full list of 30 symptoms, read the slides from Health & Her

Impacts of Menopause

13 million peri or menopausal women in the UK.

76% of women felt their partner didn't have the knowledge or resources to support them through the menopause properly.

68% of divorces involving women at this time of their life was initiated by wives. (It's worth noting in same sex relationships, the divorce rates are even higher.)

Female suicide rates peak between **47 and 49**, coinciding with the typical perimenopause age in the UK.

Women **often perceive men don't understand**, and many find it hard to approach a male colleague, GP or even their partner to discuss how they are feeling.

77% of women find at least one menopause symptom **very difficult** to deal with:

- ✔ **84%** experienced trouble sleeping
- ✔ **73%** experience brain fog
- ✔ **69%** experience difficulties with anxiety and depression
- ✔ **45%** of women have not consulted a GP about their symptoms
- ✔ **14%** of women are currently taking prescribed HRT treatment

Cost to Business

Menopause is costing businesses talent and lost productivity

It first hit the headlines as a workplace topic with the publication of a government report in 2015 championing older workers.

The report urged employers to consider support for older women who are going through the menopause. 2 years later, research produced by the University of Leicester found that menopause is not well understood or provided for in workplace cultures, policies and training.



Fast forward to the present day and menopause is trending.

Low levels of education on issues around menopause is widely documented and, until recently, menopause wasn't part of the school curriculum. Many GP's have little or no training in menopause, 5 to 7 hours to be exact, and historically the topic has been treated as a workplace taboo.

As a result, for many people the arrival of menopause and the accompanying symptoms are a huge surprise and present considerable challenges in the workplace.

Highly competent, high performing employees often find their career stalling or even derailing as hormonal changes kick in, to the extent that research highlights:

1 in 4 women have considered leaving work

Those who take long term absence from work to manage their symptoms take an average of 32 weeks leave, resulting in damage to individual's careers and a huge loss of productivity to the business.

10%

of the workforce is going through perimenopause or menopause

90%

of women said their work life has been negatively affected by the menopause

3 years

is the time it takes to get diagnosed by a GP

80%

will experience life-affecting symptoms

45%

will find their symptoms hard to deal with

Why this is important to business:

- ▶ **5.1 million** women over 45 are in the workplace
- ▶ Women aged 50+ are the **fastest growing workplace demographic** (Brewis et al., 2015, CIPD, 2019)
- ▶ People are now **working and living longer** i.e. In 1986 the average age of the labour market exit was 60; by 2020 it had increased to 64.3 (DWP, 2021)
- ▶ Approx. **80% of women** experiencing menopause are in work
- ▶ **14 million annual sick days are taken** resulting from menopause symptoms at a cost to the UK economy and businesses of **£1.8bn**
- ▶ **Nearly 1 million women** have left jobs due to menopause.

- ▶ It costs approximately **over £30k to replace a lost employee** who earns £25k.
- ▶ The Parliamentary Women's & Equality Committee inquiry recommends menopause become a **protected characteristic** under The Equality Act 2010.
- ▶ Employment tribunals involving menopause have **quadrupled** in the past three years.

Clearly from the research and statistics above, we can say that menopause in the workplace is not spoken about enough, as a result people don't feel comfortable to disclose it, meaning support isn't provided, people continue to suffer in silence, and ultimately leave employment.



"We are living life like it's not happening."

Michelle Obama

Workplace Adjustments

1. Understand your workplace demographic

- HR can usually give you a breakdown, but use this data carefully as this is only a guide.
- Menopause is as unique as your people experiencing it.

2. Understand what your people need & create a business case

- Run a survey and use the feedback and your existing data to quantify the business case.
- Use caution as we know only 1% of people feel comfortable disclosing their menopausal status at work.

3. Produce menopause workplace policies and guides

- Refresh your existing policies and procedures, include menopause in any guidance, or create a new policy.

4. Train your managers

- Culture begins with open and transparent communication. Make all colleagues aware of the impact. Create training to ensure employees can spot the signs and are able to have sensitive and confidential conversations.

5. Create safe spaces for discussion

- An open discussion can help remove the stigma or embarrassment. However, avoid calling

this 'the menopause room' – experience has shown this scares people off!

6. Action adjustments

Colleagues don't want to be treated differently. This isn't about giving special treatment, it's about employers acting in a way that levels the playing field and changes perspective so everyone can thrive. Following all of these points, ensure an action plan is put in place that means these adjustments are made.

7. Communicate

Finally, make sure the company stance is communicated for all colleagues to see it and make it accessible so those impacted know where to go and how to get support. Quite often businesses will say we've got a menopause policy, but does everyone know where it is? Employees need to understand how to access it and managers to know how to use it to support colleagues in the workplace to thrive.

Women aged 50 to 64 are the fastest growing workplace demographic, so support in your business is needed or you could have key recruitment and retention issues. It's important that employers tap into this talent, especially when considering the current skills shortages seen in the employment market currently.

According to the ONS Report, the gender pay gap is widest for women over 50, often at the top of their careers with many more years to go. It does not make business sense to press pause on these careers, or for people to be disadvantaged for a natural stage of life aging.

Most importantly: consult with experts because getting it wrong can have huge ramifications.

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Menopause Workplace Support Plan

Speak to Health & Her today to discuss the different ways they can help support your business when developing a menopause workplace support plan. Some of the services they can work with you on include:

Free menopause surveys

To give employees a confidential voice and establish baseline need

Menopause policy development

Guidance & best practice to create bespoke policy

Menopause Specialist GP consultation for employees

Empowers women with expert support and treatment planning

GP led webinars

and menopause awareness training to get the conversation started

Awareness raising

Complimentary menopause posters and assets to raise awareness and signpost to support available.

Health & Her App

Free menopause app allows women to track their symptoms, triggers and period changes. Provides employees with access to expert advice, evidence-based exercises and personal insights.

[Visit Website](#)

[Contact Niki](#)

About Anna Denton-Jones & Refreshing Law

Anna Denton-Jones is an Employment law specialist at [Refreshing Law](#). An Oxford graduate, qualifying in 2000, Anna is an experienced trainer with a passion for sharing good HR practices and has spent the last 20+ years dealing with legal cases and complex complaints.



She spends approximately 30% of her time on tribunal work, the rest is trying to avoid people needing to get there. Her focus is on resolving cases as swiftly and sensibly as practicable to the benefit of her clients.



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She holds the Law Society's Lexcel accreditation, only given to those who can demonstrate an outstanding commitment to customer care. In addition to that, Anna is a trained mediator, assisting parties to resolve disputes quickly where mediation is an appropriate medium for alternative dispute resolution.

The Legal Implications

Health & Safety

Comprehensive health and safety documentation is important and not necessarily considered in relation to the menopause. Consider a risk assessment, for example if someone is suffering greatly from sleep deprivation symptoms, you should be considering if they are going to be safe to drive and concentrate in their work.

As a result of identifying a hazard, more flexible work options could be given. With people experiencing cognitive symptoms, you should consider the employee's wellbeing in your health & safety risk assessments too.

Is it a disability?

Equalities Act 2010 – definition of a disability: *"a physical or mental impairment which has a substantial or long-term adverse effect on the person's ability to carry out normal day to day activities."* Of course, menopause is not itself a disability, in the same way stress isn't, but in legal cases, symptoms can be amounting to impairment. In a case-by-case assessment, for HR it could be safer to assume it is and behave accordingly.

Discrimination

At the moment, the menopause has to be shoe-horned into existing categories of discrimination, either sex, disability or age, so potentially somebody could claim unlimited compensation. (Discrimination claims tend to be the one that people get scared of because of that factor).

When managers are identifying employees as being forgetful, potentially having attitude issues or more, this starts to fall into 'poor performance' territory. HR should be looking at all avenues and consider all issues, looking behind the initial assumptions made by managers. Is something contributing to this, i.e. menopause?

Reasonable Adjustments – legal duty where there is an impairment

Reasonable adjustments have to be considered on a case-by-case discussion with the person, without judgments, stereotypes or assumptions. What one person needs and is experiencing can be very different to what somebody else is experiencing.

Some examples include:

- ✔ Someone experiencing hot flushes throughout the day might appreciate a new desk by the air con, or sitting close to a window or fan.
- ✔ Work design is important, and part of this could be new flexible work patterns. This isn't just working from home, and can be adjustments to hours, i.e flexibility on coming in a little bit later if an employee has had difficulty sleeping.
- ✔ One symptom is sensitivity to noise, so if this flares up you should review where they are sitting, can they wear headphones to block out the office noises?
- ✔ Breaks during training sessions and meetings to allow toilets break, access to water and coffee breaks.
- ✔ Employees may experience memory loss, so you could recommend minutes are taken and agenda points from the meetings are emailed to all after.

If an employer is taken to court, a judge will be looking for proof of reasonable adjustments having been made without the employee having had to ask.

When it comes to the defence section 15 claims (see following page) they will be looking for evidence of the adjustments you have made to persuade them you are acting proportionately in achieving a legitimate aim. In cases where there aren't reasonable adjustments made, this will most likely go in favour of the employee.



Indirect sex and disability discrimination

Where there is a policy or procedure applied to everybody, that potentially those affected by menopause can say this has a bigger or different impact on them, this will fall into indirect discrimination.

An example is forcing a certain type of uniform to be worn and women struggling with the synthetic fibres, causing worsened conditions for hot flushes. That would be an example of potentially indirect discrimination where somebody can say this is the effect it's having, it's having more of an effect on women, and then potentially claim via the discrimination legislation.

Another example might be a standard working pattern or no work from home options given. No flexibility discriminates against women with childcare duties in the same way it could be seen to discriminate against someone going through the menopause, arguing that it puts them at a disadvantage.



Section 15 Equality Act – discrimination arising from a disability

Here the employee has had 'something' happen eg:- action for poor attendance – the law then asks us to look behind that 'something' and see if it is connected to the disability so if the attendance has been poor because of menopause symptoms, taking action over the absence could be discrimination.

As explained above, the employer is expected to make reasonable adjustments when managing attendance – this could be altered trigger points for menopause related absence so more lenience.

Harassment

Harassment claims can arise in the workplace via unwanted comments and conduct, i.e. *"Don't hassle Jenny, she's menopausal"* / *"Stop talking lady issues in the office"* etc, creating an intimidating, hostile, degrading, humiliating or offensive environment.

These days, cases are pleaded much more broadly, and time to act can be mentioned, i.e. *"it took HR six months to action my complaint"* might be pleaded as an act of harassment, so employers can end up with layers of complaints.

If somebody is off work for more than 10 days, we've only got a **20%** chance of getting them back to work.

An early intervention is needed and try not to let things get to the **32** week absence zone that Health & Her mentioned.

Once you're into the **32** weeks, chances are that employee is not coming back and then will exit through the sickness absence management process rather than return.

Send employees to get occupational advice with a menopause specialist organisation such as Health & Her.

This is a valuable move for both the employee who will feel supported, as well as the organisation who will have tips on what to try before reaching a crunch point.

Drafting your menopause policy:

Setting out a policy is important. Even from a support point of view it signals to your employees that you care and encourages conversations and openness around the topic.

Things to keep in mind when drafting the policy:

- ✔ What is the policy for?
- ✔ Outline what the menopause is for all employees to have a clearer understanding
- ✔ Encourage conversations on the topic
- ✔ Include risk assessments (as highlighted earlier)
- ✔ Mention support available and reasonable adjustments that can be made
- ✔ Highlight things that employees can do to help

Things to avoid:

- ✔ Don't make assumptions
- ✔ Focusing on the issue – instead focus on the solution
- ✔ Discrete information sharing – you need consent when sharing employee's information under the GDPR rules.
- ✔ Don't offer medical advice – there can be a temptation for line managers to give medical advice, eg:- go on HRT, and not understanding the implications. Instead, sign post people to sources of support, for example Health & Her.

Useful links and sources of advice:

Centre for Ageing Better, guide to becoming an age-friendly employer:
www.ageing-better.org.uk

Business in the Community toolkit for employers: www.age.bitc.org.uk

CIPD posters and guides: www.cipd.co.uk
www.menopausecafe.net

RDPI Midlife Matters: info@rdp-int.com

TUC guidance on the menopause:
www.tuc.org.uk/sites/default/files/TUC_menopause_0.pdf

NHS information pages www.nhs.uk/Conditions/Menopause/Pages/Introduction.aspx

British Menopause Society: www.thebms.org.uk

Menopause Matters: www.menopausematters.co.uk

The Daisy Network: www.daisynetwork.org.uk

The Fawcett Society: <https://www.fawcettsociety.org.uk/menopauseandtheworkplace>

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