The Last Taboo – Managing the Menopause in the Workplace

March 11th 2015 was NHS Change Day, the day when NHS staff are asked to make a pledge to change the NHS for the better through something they can do in their daily work. In 2015 staff were asked to share what they have done in previous years with others, Natasha North and Hannah Short shared information on their #changethechange campaign centred on menopausal health care.

The two campaign founders believe that women going through and following the menopause are being failed by health services, with a lack of knowledge of post-reproductive health care in the medical field and confusing and conflicting advice available to women. They ask that other people join them in challenging existing attitudes and raising awareness of menopause related health conditions.

The menopause and its effect on women at work has also been highlighted in several recent reports. Women, Work and the Menopause suggests that whilst the menopause in itself does not impact on productivity, lack of organisational support and unsympathetic workplace cultures can exacerbate symptoms and this can influence women’s engagement with and enjoyment of work.
Estimates from Menopause UK suggest that there are 13 million women in the UK currently going through or having reached menopause – that’s a third of the female population. In the NHS as a whole 77% of the workforce is female and in Bridgewater this figure is 91% with more than half over 45 years of age.

The menopause occurs in all women, natural menopause can occur from the age of 45 with the average age of onset in the UK at 52 years of age. The start of the menopause before 45 is referred to as early menopause and before the age of 40 as premature menopause. Menopause can also occur due to specific treatments such as chemotherapy or radiotherapy or can be as the result of surgery – most commonly hysterectomy.

Whilst the menopause is a natural part of aging it is not plain sailing. A 2014 Nuffield Health survey showed that of 3,275 women questioned 67% felt they got little support, advice or treatment for their symptoms and a quarter struggled to cope with aspects of their life as a result of their menopausal symptoms. Almost half (47%) said they felt depressed and 37% said they suffered with anxiety.

The survey also suggested that in the workplace menopausal women fared badly with 72% feeling unsupported and 10% who had seriously considered giving up work as a result of their menopausal symptoms.

Physical symptoms can include hot flushes, night sweats, insomnia, nausea, aching joints, palpitations and headaches. Psychological and emotional symptoms are also common but the causes can be complex. Anxiety, irritability, depression, sadness, difficulty concentrating, anger, forgetfulness and mood swings are all common. Hormonal changes and the impact of physical symptoms are responsible for a lot of these mental symptoms but it must be borne in mind the other potential changes in a woman’s life at this time – children leaving home, divorce, widowhood and the death of parents. Women may feel they are no longer useful and may feel they are unemployable, suffering feelings of low self-worth and a distorted body image of themselves.

In 2011 the British Occupational Health Research Foundation published research by the University of Nottingham which explored women’s experiences of working through the menopause, this showed:

- Many were little prepared for the start of the menopause and even less equipped to manage the symptoms in work
- More than half had not discussed their symptoms with their line manager, most were not comfortable discussing their difficulties particularly if the manager was younger or male
- The majority felt they needed more advice or support
Where women had taken time off sick to manage their symptoms only half disclosed the real reason for their absence

Many women had to work hard to overcome their perceived shortcomings, others considered working part time or giving work up altogether

The Nuffield research flagged a number of barriers that could be causing many women to miss out on advice, treatment and support which could have significant improvements on their quality of life through the menopause:

- 45% of women questioned failed to recognise symptoms such as joint and muscle ache, irregular periods, night sweats, mood swings and poor memory as symptoms of the menopause
- 42% mistakenly believed they were too young or too old for symptoms
- 25% put the symptoms down to stress

The symptoms which had the biggest impact on working life in the 2011 research were:

- Poor concentration (51%)
- Tiredness (50%)
- Poor memory (50%)
- Feeling low/depressed (42%)
- Lowered confidence (39%)
- Sleep disturbances (37%)
- Irritability (36%)
- Hot flushes (35%)
- Joint and muscular aches and discomfort (31%)
- Mood swings (29%)
- Anxiety/panic attacks (25%)

Working in hot and poorly ventilated areas, formal meetings and high visibility work such as formal presentations were all stated as making symptom management more difficult.

The women stated they had developed many strategies for coping with problematic menopausal symptoms at work that they believed to be helpful:

- adjustments to their immediate work environment (e.g. obtaining fans or opening windows)
• adjustments to work routines (e.g. changing working hours, taking breaks, taking days off, not working voluntary overtime and adopting flexible working practices)
• active coping strategies (disclosure and humour)
• compensatory strategies such as writing notes, lists and making regular use of technology
• avoidance or withdrawal from challenging situations or tasks

Evidence from the Nuffield Health 2014 report reiterated the 2011 research above and showed that despite the large numbers of women dealing with the symptoms of the menopause the subject remained taboo in the workplace, with 90% of women questioned feeling unable to talk to their manager. 18% said they had needed to take time off work and 2% of working age women with symptoms were on long term sick leave.

As the population and workforce ages it becomes increasingly important that older workers, including women going through the menopause, are supported to remain in employment, some work sectors in the UK are already experiencing a skills shortage as people choose to retire rather than remain in employment. Reports suggest that for many women retirement is seen as the only option when confronted with a lack of support and understanding of their health needs through the menopause. Nationally there is an increasing emphasis on understanding the needs of older workers and the role they will play in the future workforce.

The health and welfare of employees is protected in the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999. In addition employees are protected under the Human Rights Act 1998 Article 8 and the Equality Act 2010. There is a duty on employers to make adjustments to the workplace environment and practices to ensure a healthy and inclusive environment for all employees, including menopausal women.

The list to follow is taken from the Women, Work and the Menopause document and sets out some ideas for improving support for older women in the workplace:
• Awareness raising of the potential impacts of menopausal symptoms on work with staff and in particular managers
• Information for line managers on adjustments that can be made to support women
• Provision of another line of support for women who may be reluctant to speak to their line manager, for example HR, Health and Safety or a wellbeing champion
• Development of information pack on ‘what to expect when you’re expecting the menopause’
• Production of a ‘one stop shop’ for staff to access information, support and advice, for example on the intranet
• Generation of material to tackle the myths surrounding the menopause
• Making the menopause part of the wider health and wellbeing agenda or a wider longer working lives strategy
• Maximising the flexibility of work time arrangements, including home working and flexible break times
• Information for HR on the impact of menopause symptoms and flexibility within sickness absence procedures to cater for menopause related issues to avoid women suffering a detriment
• Practical solutions to workplace temperature management, such as raising staff awareness and easily accessed provision of desk fans
• Consideration of access to bathroom facilities and drinking water for women working out of the office
• Flexibility within the uniform and dress code policy

By acknowledging the difficulties some women may face in work as a result of the menopause and by being aware of the impact of the environment and practices of the workplace on these women a culture change can take place whereby older employees can feel supported and engaged, where symptoms can be managed and their impact reduced and where these older women can be recognised as the committed, ambitious and resilient members of the Trust’s workforce they are.

Dr Julie Ayres, Specialist in Menopause and PMS at Nuffield Health Leeds, said:

“The issue needs to be dragged into the 21st century. Increasingly employers are beginning to take employee health and wellbeing seriously, with numerous initiatives to help improve health and fitness, yet clearly the menopause remains taboo. Until we shine a spotlight on the subject and try to tackle some of the difficulties that women are facing at work, we stand to lose experienced and talented women who should be at the peak of their career rather than facing forced retirement or feeling alienated.”

References

• Women, Work and the Menopause: Releasing the Potential of Older Professional Women (Le Trobe University 2014)
• Women’s Experience of Working Through the Menopause (The University of Nottingham 2010)
• A New Vision for Older Workers: Retain, Retrain, Recruit (Dr Ros Altman 2015)
• What is the Menopause (NHS Dumfries & Galloway)
• The Menopause and Work (Unison)
• http://www.menopausematters.co.uk/index.php
• http://changeday.nhs.uk/campaigns/changethechange/