

Introduction

The University is committed to providing a supportive, safe and inclusive working environment for all our staff.

Women comprise approximately half of the UK's workforce and almost all of them will experience menopause during their lifetime. The changing profile of the UK's workforce means that around 80% of menopausal women are in work and this is likely to increase. Menopause can be a difficult time, but the right support at work can help to reduce or eliminate some of the challenges.

This document is intended to:

- provide guidance to line managers in supporting staff members who may experience workplace challenges due to their menopause
- inform line managers about the likely symptoms of the menopause and how these can impact on work
- support managers and staff in considering temporary or longer-term adjustments that may be helpful
- encourage open, comfortable and clear conversations that let staff know that they are valued and that their managers want to support them through different transitional periods in their lives

In this document, we will tend to refer to the menopause affecting 'women', but it should be noted that not all women experience menopause-related difficulties, and that menopause may affect some Trans men and non-binary staff. This document is applicable to any staff member experiencing menopause.

What is the menopause?

The menopause is part of the natural ageing process for women. It refers to the time when menstruation has ceased for 12 consecutive months. This most often occurs between 45 and 55. However, some women experience early menopause, possibly while still hoping to conceive children, and some may not experience it until later. Menopause occurs naturally, or as the result of medical treatment or disease (such as cancer or hysterectomy), and can affect staff within a very wide age range.

Typically, during the period before the menopause (known as perimenopause), hormonal changes lead to menstrual irregularities. This is followed by cessation of menstruation and continued hormonal change (post-menopause). Overall, the process typically lasts from four to eight years, although some may have symptoms for longer. Symptoms can include hot flushes, palpitations, night sweats and sleep disturbance, fatigue, poor concentration, irritability, mood disturbance, skin irritation and dryness. Psychological health can be affected too, with some people experiencing anxiety or depression. More detail on symptoms are available in Appendix 1.

Different people can experience the menopause very differently, with symptoms that vary in both range and intensity. Some women with pre-existing health conditions may find that the menopause aggravates existing conditions or triggers new ones.

A person experiencing symptoms, which substantially impact on their ability to carry out normal day-to-day activities for a period of at least 12 months, could also be said to be disabled by them under the Equality Act 2010. This is another reason why it is important for managers to support individuals and make whatever reasonable adjustments they can to minimise and manage the workplace impact.

Dealing with menopause

Some women prefer not to 'medicalise' the menopause, seeing it as a natural life stage to be experienced without interventions or medications. Others may choose to take hormone replacement therapy (HRT) to relieve some of their more troublesome symptoms, but this may not be available to or appropriate for all and does not address all issues. Whether or not to take HRT is a personal decision, which women may wish to discuss with their GP.

The menopause often occurs at challenging times in women's lives when they are juggling a range of demands. They may be managing chronic health conditions, the risk of which increases with age. Women also typically bear the greater share of domestic responsibilities, childcare and care of disabled or chronically ill partners, parents and friends.

How does it affect women at work?

Studies show that around 50% of women find menopausal transition does not cause significant problems at work, but nearly half find it somewhat or difficult to cope with and a small minority report it to be very or extremely difficult. Menopausal symptoms can pose embarrassing problems for some women, leaving them feeling anxious, less confident and at odds with their desired professional image.

The main problems at work that women attribute to their menopause are poor concentration and memory, tiredness, feeling depressed and lowered confidence. Hot flushes can be a major source of distress for some, especially where they feel this is visible to others. Situations that make hot flushes more difficult to cope with include working in warm and humid environments, formal meetings, and high visibility work such as presentations.

How can managers encourage communication about health issues?

With any longstanding health-related condition, sensitive and appropriate support from employers and line management is crucial to provide employees with the help they need. Such support encourages employee engagement and performance, removing barriers to staff feeling able to bring their talents, knowledge and energy to their work. In order to discuss and provide support, managers need to know about problems that affect people at work, even those which some may find it uncomfortable to raise. People are more inclined to disclose when they regard managers as supportive and there is a culture of openness about health issues.

Some studies show that menopausal women are reluctant to disclose the real reason for absence to their line managers when they take time off due to menopausal symptoms. They find such disclosure embarrassing or fear that managers would be embarrassed. This is particularly the case if their managers are younger than they are or male. A notable exception is where managers have experienced a family member's menopausal transition and share this with colleagues. Where menopause is not perceived to be an awkward, misunderstood or taboo topic, women are much more likely to disclose a need for support.

Line managers can encourage staff to feel able to raise personal issues such as menopause by:

• having regular conversations where they ask about their general wellbeing

- regularly sharing information about workplace events and activities which relate to menopause or other health/wellbeing or equality/diversity subjects; this helps communicate that issues such as the menopause are 'normal' and not taboo
- always maintaining discretion, confidentiality, sensitivity and open-mindedness regarding any information shared with them

What can managers do to help?

Managers should be aware that staff may adapt their habitual working practices. Women develop many strategies themselves for coping with problematic menopausal symptoms at work, but the success of these depend on well-informed, supportive managers. People experience menopause differently so one-size-fits-all solutions may not be appropriate. Managers need to have sensitively conducted discussions about what would be helpful and what is relevant to this staff member and their own symptoms. Occupational Health may also be able to offer advice, for which referral from a line manager is required.

Reasonable adjustments need not be costly, complicated or permanent. They can be as simple as temporarily allowing greater flexibility over the taking of breaks, or to provide additional sets of uniform. Offering women more control over their working environment or relocating them to a more congenial workspace can be helpful. Actions to consider might include:

- greater awareness about the menopause as a possible occupational health issue for example, by undertaking training (both for managers and colleagues)
- increased flexibility of working hours/arrangements, which could include potentially
 occasionally performing some activities outside of normal working hours/locations (where
 possible and when agreed in advance), and adjustments to break times
- better access to informal and formal sources of support
- better access to adequate toilet and washing facilities, and to drinking water
- improvements in workplace temperature/humidity and ventilation
- consideration of uniforms and protective equipment

More information on potential adjustments is provided in Appendix 1.

Further information and sources of support

There is increasing awareness of the menopause as a possible occupational health issue, and many organisations and trades unions are beginning to produce guidance for employers. This guidance document has been informed by the following documents:

- Faculty of Occupational Medicine of the Royal College of Physicians (FOM) Guidance on Menopause and the Workplace - <u>http://www.fom.ac.uk/health-at-work-2/information-for-</u> <u>employers/dealing-with-health-problems-in-the-workplace/advice-on-the-menopause</u>
- UNISON's model Menopause in the Workplace Policy -<u>https://www.unison.org.uk/content/uploads/2019/10/25831.pdf</u>
- ACAS has a 'mini-site' with a range of information and advice about Menopause at Work
 <u>https://www.acas.org.uk/index.aspx?articleid=6752</u>

At the University

For further guidance, contact the HR Employment Relations team at: <u>hrer@nottingham.ac.uk</u> or Occupational Health via <u>https://www.nottingham.ac.uk/hr/services/occupational-health.aspx</u>.

Staff members can also be signposted to the Women's Staff Network, who regularly hold briefings and discussion groups about women's health issues, including menopause, email: <u>BR-Womens-Staff-Network-Committee@exmail.nottingham.ac.uk</u>. The LGBTQ Staff Network can be contacted at: <u>UI-LGBTQ-Staff-Network@exmail.nottingham.ac.uk</u>.

Other sources of support

To learn more about menopause and its management, as well as speaking to their GP, staff may wish to visit the British Menopause Society web site at: <u>https://thebms.org.uk/</u>.

Quick guide to common symptoms and potential reasonable adjustments

Commonly reported (and typically temporary) symptoms of menopause include:

- Hot flushes that can start in the face, neck or chest, before spreading upwards and downward; may include sweating, the skin becoming red and patchy, and a quicker or stronger heart rate. Sweating may be profuse, requiring a wash and change of clothes.
- Heavy and painful periods that can be very tiring and require frequent changes of sanitary wear and need to wash. Some affected may become anaemic.
- Night sweats, restless leg syndrome and sleep disturbance leading to fatigue.
- Low mood, irritability, anxiety, panic attacks, palpitations (noticeable heartbeats), loss of confidence, tearfulness/feeling emotional, withdrawing.
- Tiredness, poor concentration, and memory problems.
- Frequent or urgent need to pass urine, urinary incontinence or infections such as cystitis.
- Dry and itchy skin, dry eyes.
- Joint and muscle aches and stiffness.
- Weight gain.
- Headaches and migraines.
- Hair loss.
- Osteoporosis, where a decrease in strength and density of bones leads to bone thinning.
- Side effects from hormone replacement therapy (HRT).

Potential reasonable adjustments to consider might include:

- Provision/PAT-testing of desk fans; review of working locations to enable employees to be near windows (with blinds) or open doors or away from radiators; greater access to chilled drinking water, fresh air and to toilets and washing/changing and break facilities.
- Dress code flexibility where possible, and where uniforms are provided, to use natural fibres where possible, and to offer additional spare sets to support frequent changes.
- Flexible working arrangements (for example, later start and end times where sleep is impacted) and to enable breaks to be taken more frequently and/or at time of need.
- Temporary changes to duties, such as fewer high visibility activities such as presentations, meetings or reception duties (where hot flushes can be harder to manage).
- Provision of stationery or software to support staff experiencing challenges with concentration and memory in recording and reviewing required tasks and activities.
- Adjustment to sickness absence procedures where the disability definition is likely to be met (see section 9 of the Sickness Absence Policy). Further guidance on managing disability is available from the HR Employment Relations Team at: <u>hrer@nottingham.ac.uk</u>.

These lists are adapted from the UNISON model Menopause in the Workplace Policy and the Faculty of Occupational Medicine of the Royal College of Physicians (FOM) Guidance on Menopause and the Workplace.