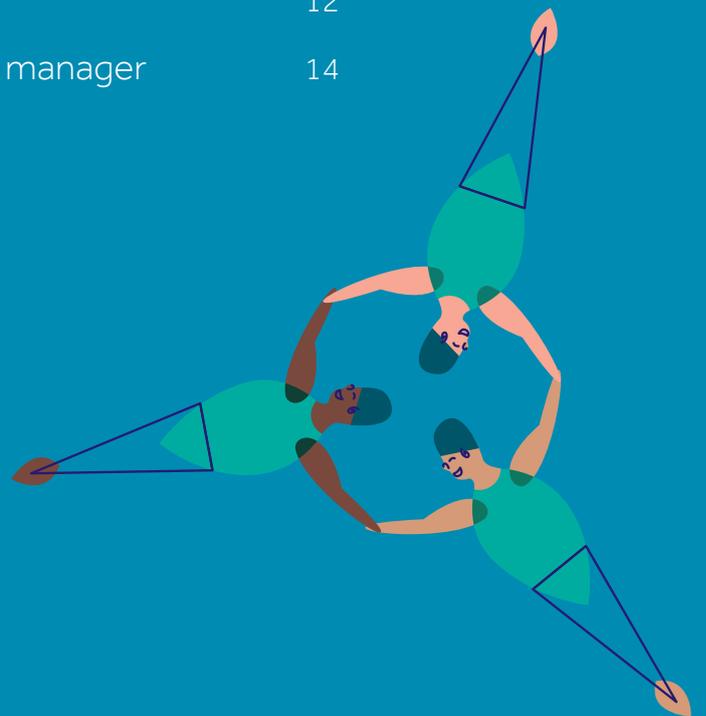


Menopause in the workplace guidance



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Introduction

This guidance document has been created to support colleagues and managers to understand more about menopause and how this may impact individual colleagues in the workplace.

For details of additional help, support, and information, see the 'Support' section towards the end of this guide.

A note on language and imagery

You'll notice a specific use of language throughout this content. Any approach to menopause needs to be inclusive because it's important to recognise that not all people who experience menopause will identify as women. This includes gender diverse people such as trans and non-binary individuals.

Traditionally, the kind of imagery that has been associated with menopause has been highly gendered; including pinks, purples, flowers, gendered symbol icons. Alongside the language of 'women,' 'ladies,' and 'female' this has created an unwelcoming environment for the range of people who experience menopause symptoms but don't identify as women.

At Anchor, we have a diverse workforce and culture, and therefore it is important that both our guidance and our culture reflects that and meets everyone's needs.



What is menopause?

The menopause is a natural part of the reproductive cycle leading to the end of menstruation. Because symptoms result from changes in hormone levels, they can affect anyone who experiences a decrease in oestrogen, including trans and non-binary individuals as well as cisgender women. It usually starts between 45 and 55 years of age, although it's important to remember that some people experience early menopause – either naturally or due to surgery.

The symptoms and feelings felt by someone experiencing menopausal symptoms will vary, so it is important to be aware of this. If you are supporting someone, be careful not to assume that the support they need will look the same as someone else's.

Although menopause is a natural process, many have no idea what to expect and find they aren't prepared for the impact it can have on their wellbeing and their personal and/or professional lives. There is a stigma surrounding menopause, which means people may be reluctant to talk about it. Additionally, medical research is significantly lacking for gender diverse, younger people, and for ethnicities other than White which can heighten this stigma and discomfort.

There are also studies by the Study of Women's Health Across the Nation (SWAN) that show people of different ethnicities experience menopause differently. Most studies consider cisgender White women, so it's important that we acknowledge that 'common' symptoms are only common for this specific group.

Factors such as gender dysphoria (discomfort or distress due to a difference between someone's biological or assigned sex and their gender identity) can add a layer of complication, too. Because most places that offer support for menopausal symptoms are highly gendered, it can be hard for trans, non-binary, and intersex people to find support relevant to them. Additional support, both emotional and physical, may be needed as there is little support available elsewhere.

What about the symptoms?

Around 75 per cent of people experience some symptoms associated with menopause, mainly as a result of the change in hormone levels. These often include an inability to regulate body temperature ('hot flushes'), heavy and irregular bleeding, tiredness or difficulties with concentration levels or memory. Appendix 1 presents a list of common symptoms that have been recognised by the NHS, but please consider that this may not be a complete list as gender and ethnically diverse people are often not included in research. Symptoms usually last between four and eight years and can vary in severity.

"It was scary... I genuinely thought I could be developing Alzheimer's! I would have to pull over the car because I'd forgotten where I was going, or I'd lose my train of thought halfway through a sentence."

Anchor colleague – Operations

It's important to remember that every individual experience is different. Don't assume that one colleague will be going through the same experience as another colleague, or as you, your friend, or a family member.

Why should we talk about menopause in the workplace?

People are choosing to continue working much later in life. In 2019, the CIPD (Chartered Institute of Personnel and Development) reported that around 75 to 80 per cent of cisgender women of menopausal age are currently in work in Britain. While this number does not include people other than cisgender women, it clearly shows that workplaces need to increase their awareness of the menopause, and consciously work to help people manage the symptoms.

There is evidence that in some cases colleagues feel they must struggle in silence or even leave their job as a result of being unable to manage the physical or mental symptoms of menopause. This is an unnecessary loss of skill, knowledge, and experience for what is essentially a temporary situation which could be managed through flexibility and understanding.

By making discussions of menopause as normal as talking about any other health condition, we can make it easier for people to know how to get the support they need. This can help colleagues stay in the workforce, maintain their performance levels, and avoid any adverse effects on their mental or physical health.

The legal position

Under the Equality Act 2010, employers have a duty not to discriminate and to treat all colleagues with respect. The act, while not explicitly mentioning the menopause, can be interpreted to provide protection against discrimination in several areas. Most obviously, this would be to prevent discrimination for reasons of age and gender, but potentially under disability too, as it can in some cases have a 'substantial and long-term adverse effect on ability to carry out day-to-day activities.' The risks of not supporting colleagues under the Equalities Act can include financial penalties and reputational damage for companies.

Health and Safety law can also be relevant to menopause, as employers have a duty to make a suitable and sufficient assessment of the workplace risks to the health and safety of colleagues.



Starting the Conversation

"I felt overwhelmed and needed to make sure I was getting some support, but I didn't know how or when to start that conversation"

Anchor colleague – Central Support

Taking the first step is often the most difficult for colleagues. Menopause has been described as 'the last great taboo' – an indication of how it's still not generally discussed in society. Or if it is discussed, it's often in a 'jokey' fashion, resulting in a concern that the very real issues will not be taken seriously.

Some women worry that they run the risk of discrimination. They may have felt their professional image suffered if they had children or caring responsibilities and have concerns that if they are open about how they are struggling with menopause this could happen again.

"A good relationship with my manager was key to me getting the support I needed"

Anchor colleague – Operations

Equally, some gender diverse people face the potential challenge of having to 'out' themselves at work or reveal unnecessary information. They may worry about the risk of discrimination here as, if they are open about their struggling with menopausal symptoms, their professional and personal image may change.

The key is for line managers to make sure they invest in good relationships with their teams, ensuring regular one-to-ones etc, so that colleagues know they can approach them when needed.

We have developed some materials to help colleagues prepare for the conversation so that if they do need to sit down with their manager, they've thought about what they're going to say and feel as comfortable as possible (see Appendices).

Appendix 2 is a 'Menopause Self-Assessment'. This can help colleagues think about what their symptoms are, when these affect them, and to consider what may help to manage them. This can be a useful tool to take into a meeting, as it can help frame the discussion.

Appendix 3 includes some simple pointers to help prepare for a meeting.

Support

Workplace Support

The good news is that many symptoms can be managed in the workplace through relatively simple and low-cost adjustments, however, these can only be put in place if the colleague and their manager are able to have honest and open conversations.

Some examples of workplace adjustments which may help some symptoms are listed below. It's key to remember that what may or may not be possible will vary in different parts of the business and by role, therefore it is important to be realistic in expectations, and to have an open mind when it comes to discussing options.

Managers must take the lead from the colleague as to what support they feel would help. Remember, every colleague's situation is different!

Symptom	Possible Adjustment	Considerations
Hot flushes	<ul style="list-style-type: none">• Provide a desktop/handheld fan• Ensure cold drinking water is available• Think about desk position (e.g. is the desk next to a radiator/window?)• Is it possible to make adjustments to workwear?• Provide more workwear to allow the option to change during the day or on a more regular basis• Are showers available and could the colleague make use of these during a break?• Can the colleague have a cold, wet face cloth to hand?	There are more restrictions around workwear in Care Services than in other areas of the business.

<p>Difficulty sleeping</p>	<ul style="list-style-type: none"> • Could shift patterns be adjusted to consider this? • Is home working an occasional option? • Is there flexibility around how breaks are taken through the day? 	<p>Refer to the Flexible Working policy for more information.</p> <p>If a colleague does not have equipment to allow for home working, but their role means this would be possible, laptops/mobiles can be requested through the IT portal.</p> <p>Home working may not be an option for all roles in the business (e.g. customer facing roles).</p>
<p>Irregular/ heavy periods</p>	<ul style="list-style-type: none"> • Are showers and other facilities available for colleagues to make use of during the day? • Is home working an occasional option? • Is there flexibility around the number of breaks and when they are taken? • Is there access to sanitary products and suitable facilities for disposal of waste? 	<p>Home working may not be an option for all roles in the business (e.g. customer facing roles).</p> <p>For gender diverse colleagues, gender dysphoria may be added to the physical symptom in this case, adding an extra layer of discomfort to the situation.</p>
<p>Anxiety, lack of confidence</p>	<ul style="list-style-type: none"> • Hold regular one-to-ones to check in and offer support. • Ensure details of Colleague Assistance Programme are available. 	<p>Consider enrolling on courses on MyLearning to support gender diverse colleagues to ensure they are treated with the same respect as anyone else.</p>

Colleague Assistance Programme

All colleagues have access to a confidential 24/7 helpline which offers information, advice, training, and other services to help deal with events and issues in their work and personal lives.

The service is provided by a range of highly experienced consultants, including counsellors, psychotherapists, solicitors, and financial experts, all qualified to give clear, relevant guidance. There are also a range of resources which are free to access on their website, or the Health e-Hub mobile app.

To access the service use “worklife” for both the username and password:

Phone – 0800 316 9337

Website – HealthAssuredEAP.co.uk

Mobile App – Search for 'Health e-Hub' in your normal app store (this app should be automatically downloaded on any company mobile phone).

Support and Advice for Line Managers

Line managers can speak to the Manager Direct team for further advice on areas such as reasonable adjustments, the flexible working policy, managing attendance or if it is felt an Occupational Health referral may be useful.

The team can be contacted Monday – Friday, 8am – 5pm on 0345 604 6635, Option 2.

Line managers can also seek advice from the Rainbow Network or the EDI team if a colleague's gender identity is relevant to the discussion surrounding menopause adjustments, for example, inadequate bathroom facilities or needing additional support.



Additional, external information and support

Please note that many of these resources contain helpful information but are heavily gendered and may cause discomfort for gender diverse individuals. Additionally, due to a lack of research regarding gender diversity and menopause, as well as ethnic diversity and menopause, most resources only reference and cater to gender binaries and White people. As such, some symptoms and advice may not be included or relevant for ethnically or gender diverse individuals.

NHS – www.nhs.uk/conditions/menopause/

The Daisy Network – information and support for women going through early/premature menopause www.DaisyNetwork.org (Note: this resource contains useful information but uses gendered language throughout and caters to cisgender women)

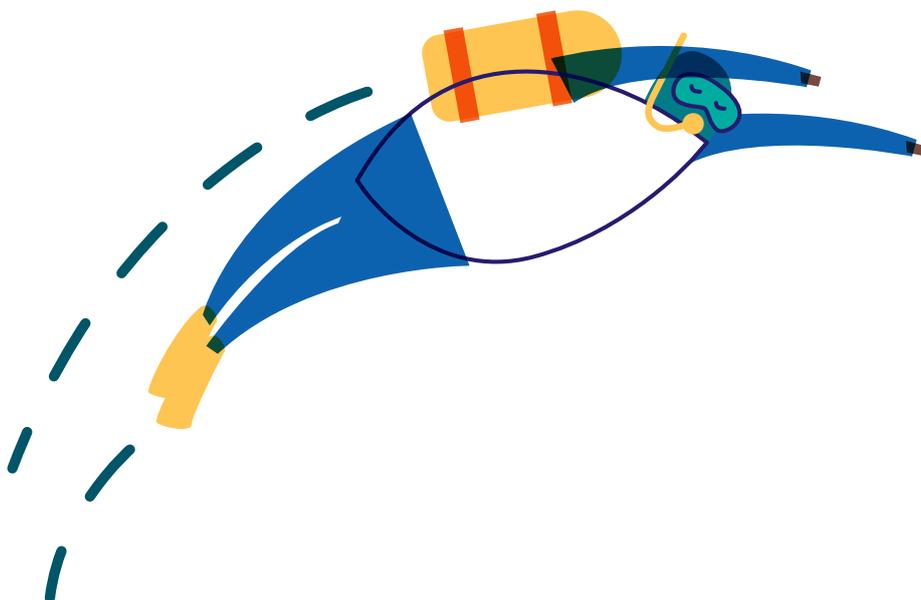
Henpicked – one of the UK's largest, fastest-growing websites for cisgender women, with lots of help and support around menopause henpicked.net/menopause (Note: this resource contains useful information but uses gendered language throughout and caters to cisgender women)

How people can support their partners through menopause online article – www.VeryWellHealth.com/supporting-your-partner-during-menopause-2322673 (Note: the language in this article is not gendered, though implies a cisgender heterosexual relationship)

Menopause Matters – an independent website providing up-to-date, accurate information about the menopause, menopausal symptoms and treatment options www.MenopauseMatters.co.uk (Note: this resource contains useful information but uses gendered language throughout and caters to cisgender women)

The Queer Menopause Collective – a collection of resources designed to promote inclusivity in menopause conversations. Also includes research and a blog. www.QueerMenopause.com

Black Women in Menopause – a website offering resources such as podcasts and blog posts. This site is aimed predominantly at cisgender Black women. www.BlackHealthAndBeyond.co.uk/menopausal-resources-and-news





Appendix 1. Possible symptoms of menopause

Remember – everyone is different, and some people may have experiences not covered by this list. Many symptoms occur due to varying hormone levels and so could have causes that are not menopause related.

The NHS website (www.nhs.uk/conditions/menopause/symptoms) lists these as some of the most common symptoms:

- **Changes to your periods.** Symptoms usually before your periods stop (called the perimenopause), but the normal pattern may become irregular, and the heaviness of periods can vary.
- **Mental health symptoms** such as anxiety, low mood, mood swings, low self-esteem, and gender dysphoria can all result from the changing hormones in your body.
- **Problems with memory or concentration (brain fog)** can be caused by a reduction of oestrogen or by difficulty in sleeping.
- **Hot flushes** and **night sweats** can result from changes in hormones and can make you **dizzy** and **impact your sleep** as well as having an impact on mood.
- **Palpitations** are when your heartbeat suddenly becomes more noticeable.
- **Headaches and migraines** that are worse than usual. Some people may get headaches alongside their periods, but they can become unpredictable with the variation in hormones.
- **Muscle aches and joint pain.** Oestrogen helps decrease inflammation around the joints and regulates fluid levels through the body. When oestrogen levels change, this can cause muscle tension and pain.
- **Changing body shape and weight gain** can occur while hormones are changing and regulating.
- **Changes to hair, skin, and nails.** Oestrogen is related to collagen production which may result in dry and itchy skin. Keratin production may also decrease around menopause, leading to brittle nails. Changes in other hormones such as testosterone and progesterone can lead to thinning hair. These changes may differ for people of different ethnicities.
- **Decreased libido** due to changes in hormones.
- **Vaginal dryness** can also occur when fluid levels and blood circulation changes in response to hormone regulation.
- **Recurrent urinary tract infections (UTIs)** can become more frequent.



Appendix 2. Menopause Self-Assessment

Colleagues may wish to use this to help them think about their symptoms, when these affect them and to consider what may help manage them.

Symptom	When experienced			Severity			Frequency					Adjustments which may help (some examples provided)
	Morning	Afternoon	Night	Mild	Moderate	Severe	Constant	Daily	Weekly	Monthly	Rarely	
Hot flushes												<ul style="list-style-type: none"> • fan • extra workwear • close to a window • access to showers
Irregular periods / heavy bleeding												
Gender dysphoria												
Mood swings / irritability												
Fatigue/sleep disorders/night sweats												<ul style="list-style-type: none"> • flexible shift times • working from home
Difficulty concentrating												
Memory lapses												<ul style="list-style-type: none"> • carry a notepad to make lists/reminders
Dizziness												<ul style="list-style-type: none"> • fresh drinking water • access to quiet areas
Weight gain / bloating												<ul style="list-style-type: none"> • extra workwear in alternate sizes
Incontinence												<ul style="list-style-type: none"> • flexibility in breaks

Symptom	When experienced			Severity			Frequency					Adjustments which may help (some examples provided)
	Morning	Afternoon	Night	Mild	Moderate	Severe	Constant	Daily	Weekly	Monthly	Rarely	
Irregular heartbeat/ panic attacks												
Depression/ anxiety												
Headaches												<ul style="list-style-type: none"> • access to quiet areas
Joint pain/ muscle tension												<ul style="list-style-type: none"> • workstation adjustments • frequent short breaks • lunchtime exercise
Osteoporosis												
Tingling extremities/ itchy skin/ electric shocks												
Gum problems/ burning tongue												
Other												

Appendix 3. Colleague preparation for a line manager meeting

1. Think about your symptoms and what may help you

- Keep a diary of your menopause symptoms and how they're affecting you. The self-assessment in Appendix 2 may help you identify any patterns.
- Think about the practical, reasonable adjustments that would help you. Try to be flexible and consider different options. Remember to include your mental health in these considerations.
- Include a timeframe if relevant, as it may be adjustments are only needed for a short period while you work with your GP to identify any treatment options.
- You may decide it will be helpful to speak with your GP first. They may be able to suggest adjustments that you hadn't considered or provide more guidance before you go to your line manager.

2. Book a meeting

- Booking a specific time means you'll have time and ideally a private place to talk.



3. Prepare what to say

Rehearse what you're going to say, either mentally or ideally out loud so that the words feel and sound natural. This should help to ensure you cover all the points you want to in the right way.

You could also write down what you need to say to prompt yourself during the conversation and make sure you don't miss anything.

4. Explain your situation clearly

- Talk about your current situation, what's happening and most importantly how's it affecting your work.
- Ideally, your relationship with your line manager is a comfortable one, but this can be a trickier conversation to navigate if you are gender diverse and may have to 'out' yourself. If you feel that you can't talk to your line manager or want extra support, you could ask a trusted colleague to go with you. The Rainbow Network and EDI team are also people you could turn to.
- Use the self-assessment if you completed it to help you cover the key points. For example:
 - You're experiencing hot flushes which mean you are struggling to keep your workwear clean and fresh; or
 - Night sweats mean you're not sleeping so you're too tired to think clearly and it's taking you longer to make decisions or complete tasks; or
 - Heavier periods mean that gender dysphoria is heightened and you're feeling anxious about some social situations.



5. Offer a solution

- Think about how your circumstances could be improved and offer a reasonable solution. For example, in the example above around hot flushes you might ask for extra workwear so that you can change part way through your shift, or even the opportunity to take a shower in your lunch break.
- Talk these through with your manager and request that some or all of these are put in place as reasonable adjustments, perhaps on a flexible basis so they can be reviewed as appropriate.
- There are resources available to help managers support trans colleagues on The Bridge and on MyLearning. If your manager has questions about this, you could direct them there, or to the EDI team for further support.

6. Follow up

- Don't expect an answer immediately. Remember - you may have been thinking about this for a long time, but it may be the first time your manager has had to think about menopause in the workplace. Allow them time to digest the information and seek advice if necessary.
- At the end of the meeting put a time in the diary to meet again, whether that's to agree a way forward, to monitor progress or provide an update.

